

PICTURES IN DIGESTIVE PATHOLOGY

Intrauterine device in the rectal cavity

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CASE REPORT

A colonoscopy was performed on a 51-year-old female for colorectal cancer screening. A soft, 3 cm long foreign body was observed in the inner wall of the rectum (Fig. 1). The rectal mucosa appeared normal. An unsuccessful attempt was made to remove the foreign body with grasping forceps and a polypectomy snare. A computed tomography (CT) without any contrast material was requested and it revealed a radiolucent body in the rectum and uterus. The colorectal surgeon removed the foreign body from the rectum by carrying out a fistulotomy. The foreign body was an intrauterine device (IUD). The patient did not report any symptoms and remembered a difficult IUD removal from the uterus eight years before.

DISCUSSION

Complications related to IUD are the following: infection, uterine bleeding, ectopic pregnancy and uterine perforation. The latter has an incidence of 1.3-1.6 every 1,000 insertions. It is not very frequent but potentially serious (1). It can happen due to a defect in the insertion technique, insertion in early puerperium, previous uterine perforation and anatomic alterations (2).

There is a wide range of symptoms, including pelvic pain, dyspareunia, metrorrhagia, dysuria, hematochezia, abscesses and fistulas. These manifestations are related to the neighboring affected structure: they have been described in the omentum (26.7%), Douglas pouch (21.5%), bowel (10.4%), and myometrium (7.4%), among others. The diagnosis is made via imaging tests such as X-rays, computed tomography, vaginal ultrasound or endoscopic studies. The World Health Organization advises the removal of all migrated devices to avoid infections, injury of surrounding organs, adhesions and possible infertility. However, some authors have suggested leaving the IUD in

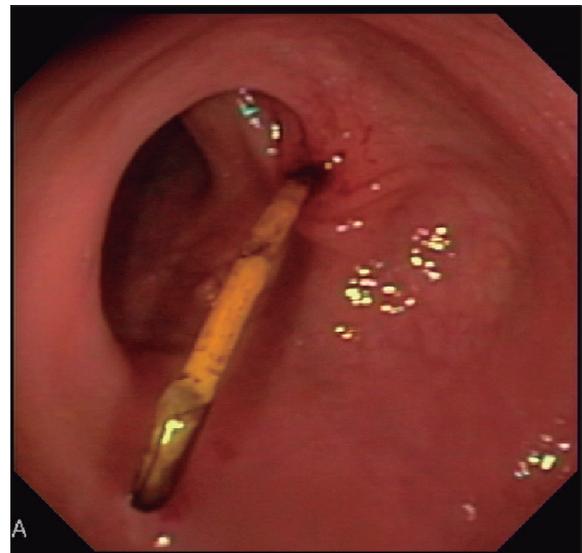


Fig. 1. A foreign body was observed in the inner wall of the rectum.

place if the patient is asymptomatic. It can be removed via endoscopic treatment or surgery depending on the location and involvement of neighboring tissues (3).

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