

**CODE:** T6700 M1803/1

**ID NOS:** HX244697 81106

**DIAGNOSIS:** COLON - MULTIPLE PERFORATED STERCORAL ULCERS.

**CLINICAL HISTORY:** M/55. This patient suffered severe abdominal pain for a day with vomiting. His bowels had not been opened for six days. The abdomen was tender and anterior wall rigid. A ruptured viscus was suspected and laparotomy showed that the sigmoid colon was distended with hard faeces and was perforated in at least three places. The affected segment was resected.

**MACROSCOPIC:** The bowel wall is thinned and multiple perforations are to be seen in the floor of a number of shallow ulcers.

**MICROSCOPIC:** Sections show the edge of an acute shallow ulcer with adjacent normal colonic mucosa (left image). The ulcer floor is covered by fibrinous slough (right image).

