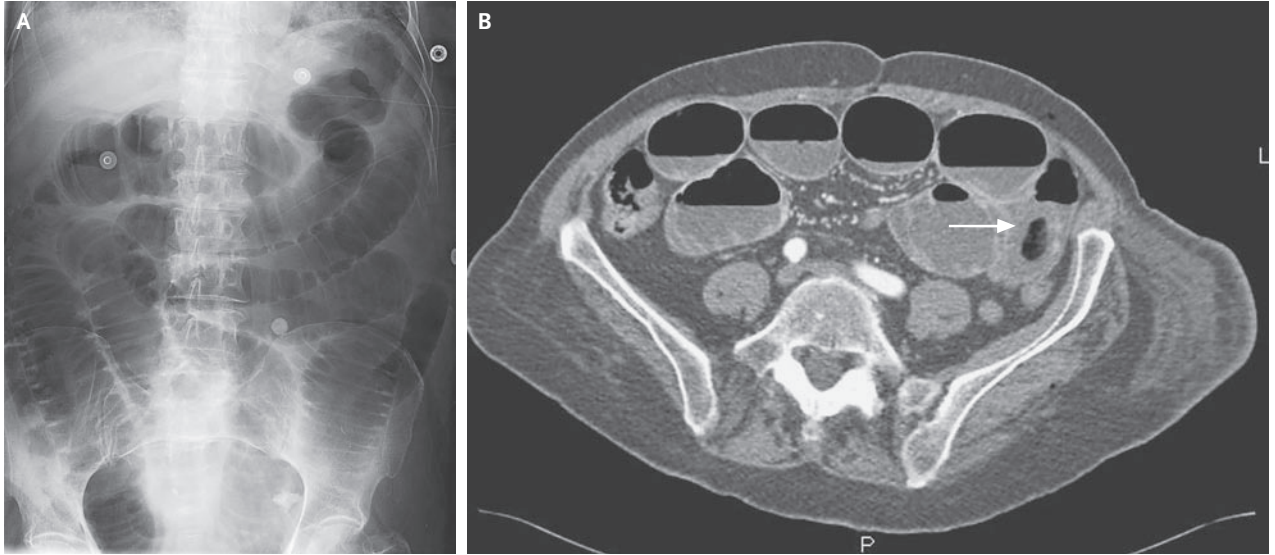


IMAGES IN CLINICAL MEDICINE

Small-Bowel Obstruction



A 72-YEAR-OLD WOMAN PRESENTED WITH A 2-DAY HISTORY OF ABDOMINAL pain associated with nausea and vomiting. Over the previous 10 years, she had had progressive Alzheimer's disease, requiring her to live in a long-term care facility. On physical examination, there were no abdominal scars or umbilical, inguinal, or femoral hernias. Laboratory tests revealed a normal white-cell count, and an abdominal radiologic examination was suggestive of a complete small-bowel obstruction (Panel A). Computed tomography showed small-bowel obstruction by an intraluminal mass (Panel B, arrow). This mass had a hyperdense periphery and an aerated core. During laparotomy, an enterotomy was performed and a plastic ball was found within the lumen. The ball was 4 cm in diameter and had a hard plastic layer and a soft core. Additional questioning did not reveal whether the ingestion had been voluntary or accidental or when it might have occurred. The patient had an uneventful recovery.

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