

IMAGES

Abdominal pain as a manifestation of emphysematous cystitis

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An 83-year-old male with a history of auricular fibrillation, benign prostate hypertrophy and chronic obstructive pulmonary disease consulted for 3-day abdominal pain with a reduction in diuresis and fever of 37.8°C. Physical examination showed a regular general status, blood pressure of 117/56 mm Hg, a temperature of 36.6°C and arterial oxygen saturation of 90%. The abdomen was distended and painful on palpation with crackling in the right flank. Blood analysis showed blood glucose of 274 mg/dL and urine sedimentation showed pyuria and bacteriuria. Abdominal x-ray (figure 1) demonstrated distension in small intestine loops and colon and the bladder was delimited by an aerial line with a hydroaerial level in the pelvis minor. An abdominal-pelvic computerized tomography (CT) was performed (Figure 2) which showed air in the vesical wall with extension to the perivesical space, right periureteral and retroperitoneum confirming the diagnosis of emphysematous cystitis. Treatment with metronidazol and amoxicillin-clavulanic was initiated but the outcome was unfavourable and the patient died 15 days later.

Emphysematous cystitis is an infrequent disease which mainly presents in diabetic, immunosuppressed patients with intravesical obstruction. This disease is characterised by the presence of gas in the wall and within the bladder and Gram negative bacteria, among which *Escherichia coli* are the most frequent aetiological agent. The clinical presentation is usually with fever and urinary symptoms, although it may sometimes be asymptomatic or with mild abdominal disorders. Treatment consists in antibiotherapy, glycaemic control and surgery if necessary.

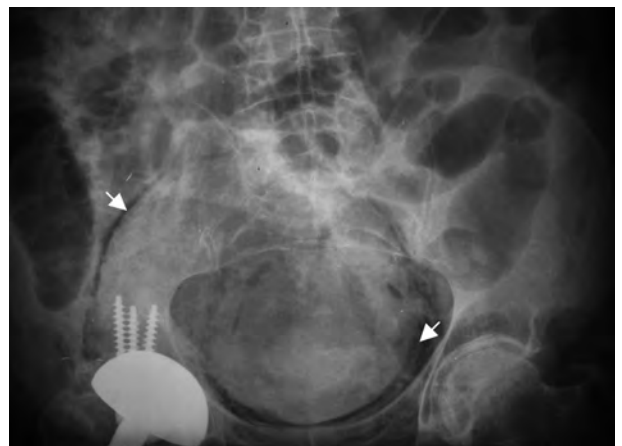


Figure 1. Radiography of the abdomen in which distension of loops of the small intestine and colon may be seen together with the urinary bladder delimited by an aerial line (arrows).

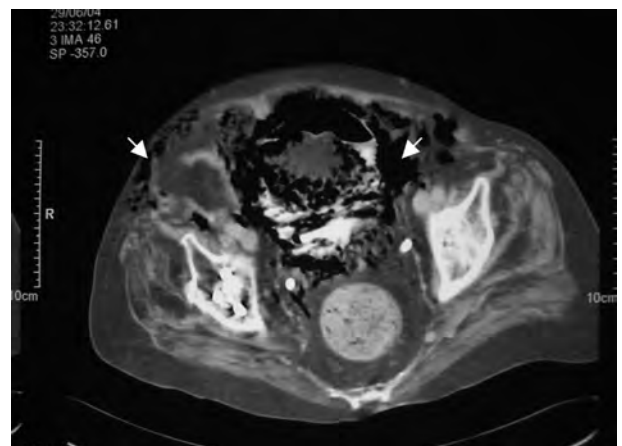


Figure 2. Abdominal-pelvic computerised tomography (CT) demonstrating air in the vesical wall with extension to the perivesical space, right periurethra and retroperitoneum (arrows).

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