



Acute intussusception in children above 5 years: a clinical study

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Introduction:

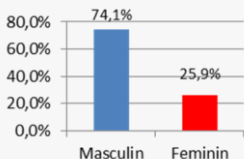
- Acute Intestinal Intussusception (All) is the most common abdominal emergency leading to intestinal obstruction in children aged 2 to 24 months.
- Although it is rare in children over 5 years of age according to most studies and caused mainly by pathological lead points (PLP).
- Recently, an increase in the frequency of All occurring after the age of 5 years was noted and it was idiopathic in the majority of cases.
- This study aimed to report the demographic and clinico-radio-therapeutic features of All in children over 5 years.

Methods:

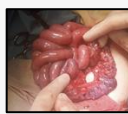
- A retrospective study including children aged over 5 and under 15 years who were hospitalized for All over an 11-year period.

Results:

- This retrospective study reviewed 112 cases of acute intestinal intussusception (All) in children aged between 5 and 13 years.
- A male predominance was observed (sex ratio 2.86).



- Abdominal ultrasound confirmed ileocecal intussusception in all cases, with coelio-mesenteric lymphadenopathy in 81.3% and suspected PLP in 3.57%. Three patients had significant peritoneal effusion, and in 4 cases, bowel viability was uncertain.



- Hydrostatic reduction was attempted in 109 patients, successful in 85.32% (93 cases), without perforation. Surgery was required in 21 cases: 3 due to poor general condition, 16 for failed reduction, and 2 for suspicious ultrasound findings. Manual reduction succeeded in 19 cases (13 preserved bowel vitality). Resection was needed in 8 patients (4 Meckel's diverticulum, 4 ischemia). Histopathology confirmed PLP in 8 of the 21 operated cases (38.1%): 4 Meckel's diverticulum, 3 Burkitt's lymphoma, and 1 Henoch-Schönlein purpura-related hematoma.

Conclusion:

- All in children over 5 years is no longer rare, representing 9.6% of 1169 All cases in this study.
- Contrary to prior reports associating All with PLP in older children, 92.86% of cases were idiopathic.