

## Bowel obstruction in pediatric age group Nursing role

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### Abstract

Intussusception is a common condition that present with abdominal colic and is usually diagnosed by ultrasonography with appearance of (Target Sign).

Over the last 35 years we have noticed a new phenomenon that mimic intussusception both clinically and radiologically but is not cause by bowel intussusception but by impacted stool at the terminal ileum.

Whereas intussusceptions an emergency that require urgent attention to reduce either by air, saline or Barium and my need urgent exploration, Gohary's phenomenon if recognized can be treated by simple fleet enema.

We have encountered 56 cases between 1983 and 2018, their age varied from 9 months and 7 years

They have the common features of

- 1- Severe abdominal colic that is not responding to analgesic or antispasmodics
- 2- US feature suggestive of ileo-colic intussusception
- 3- No red current jelly stool .intussusception
- 4- Good response to fleet enemas

More recently we have encountered a subgroup of patients that have genuine intussusception on radiological examination but not causing complete bowel obstruction and still associated with had stool in the large bowel and still needs simple fleet enema to cure.

We hope by highlighting this new phenomenon to avoid unnecessary radiological investigation and unnecessary abdominal exploration.

### Biography:

Dr. Amin Gohary is Professor of pediatric surgery, head of the department. Ex-President of UAE pediatric surgical association External examiner for the royal colleges of surgeons in UK.

### Speaker Publications:

1. "Severe colic mimicking intussusception: a new phenomenon."
2. "Laparoscopic versus open high ligation of the testicular veins for the treatment of varicocele"
3. "Laparoscopic management of persistent müllerian duct syndrome."

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