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(snapshot)

Bowel wall “thumbprinting” in pseudomembranous colitis

A 39-YEAR-OLD WOMAN with AIDS (CD4 count, 30
cells/μL) had a 4-day history of nausea, vomiting and
profuse watery diarrhoea. The patient was afebrile and had
a distended abdomen with diffuse guarding without
rebound tenderness. Abdominal x-rays (Box 1) and com-
puted tomography scans (Box 2) were performed. The
white blood cell count was within normal limits and stool
cultures were negative. Colonoscopy revealed yellow
plaques throughout the colon. The patient improved clini-
cally after taking oral metronidazole.

Bowel wall “thumbprinting” (the appearance of
“thumbprint”-shaped projections) is a radiological sign of
thickening of the colonic wall. It occurs secondary to
submucosal haemorrhage and oedema from capillary leak-
age.1 It can result from any process that leads to oedema of
the bowel wall, including pseudomembranous colitis (as
shown here), ischaemic colitis, non-infective inflammatory
bowel disease, other infective bowel diseases, submucosal/
intramural haemorrhage and other conditions.2 The
mucosal damage and inflammation seen in pseudomem-
branous colitis are caused by Clostridium difficile toxin.3

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