Acute intussusception due to intestinal Kaposi's sarcoma in an infant

Sir,

Acute intussusception in children is idiopathic in almost 90% of the cases.[1] We recently received an infant with intussusception in which Kaposi's sarcoma was the lead point.

The 5-month-old male infant had been managed by a paediatrician on account of abdominal distension for 6 days and was later referred to paediatric surgery. His general condition was very poor. He was dehydrated, weighted 5 kg 400 g, with blood pressure of about 90/40 mmHg, temperature 38° and pulse 100 b/min. The abdomen was distended, with weaves of persistaltis. There was a vague tenderness, but no mass could be palpated because the abdomen was tense. Anorectal examination revealed mucoid stools and a plain abdominal radiograph showed air fluid levels.

The patient was resuscitated and had laparotomy. The intraoperative findings were a necrotic ileo colic intussusception with haemoperitoneum. The gangrenous bowel was resected with end-to-end anastomosis. There was a fusiform lead point that was histologically confirmed to be Kaposi's sarcoma.

He developed anastomotic dehiscence 7 days later that necessitated reexploration and reanastomosis. Ten days after the second surgery, he developed bowel obstruction that warranted a second reexploration during which a terminal ileostomy was performed. He had an uneventful recovery and was discharged after 1 week. After 2 weeks of follow-up, he was lost to follow-up until 6 years later when he presented with clinical signs and laboratory proofs of full-blown acquired immunodeficiency syndrome. The child died 10 days later.

The intestinal Kaposi's sarcoma is exceptional in children, unlike the 34% incidence of Kaposi in human immunodeficiency virus (HIV)-positive adults.[2] Unlike bowel obstruction, intestinal perforation or an appendicitis caused by Kaposi, which are frequently reported in HIV-positive adults,[4-6] only one case of intussusception with an intestinal Kaposi's sarcoma as the leading point has been described.[3] The finding in this report is a pointer that the intestinal Kaposi's sarcoma-related complications are present in HIV-positive children also.

This communication, therefore, is a call for vigilance among paediatric surgeons that intussusception may be caused by Kaposi's disease, particularly in areas where HIV is endemic.

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