

Large abdominal wall lipoma causes bowel obstruction

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Proteus syndrome is a complex disorder associated with varied, disproportionate, asymmetric overgrowth of many body parts and unregulated adipose tissue. The overgrowth seen in Proteus syndrome is progressive and difficult to manage. Patients with Proteus syndrome require repeated treatment for the progressive overgrowth of tissue over a long period. Aggressive treatment may cause severe functional and cosmetic consequences, so surgical intervention is often delayed until it is absolutely necessary.

This report written by Yoshifumi Nakayama from Japan presents a surgical case of a large lipoma in the abdominal wall of a patient with Proteus syndrome. Their article is to be published on July, 14 2009 in the *World Journal of Gastroenterology*. On physical examination, a large mass with unclear margins was found in the left lower quadrant of her abdominal wall. A plain abdominal X-ray examination indicated scoliosis and deformity of the pelvic bone. Colon gas in the left colon shifted to the right upper side. Computed tomography (CT) of the abdomen demonstrated a large mass in the subcutaneous adipose tissue at the left lower abdominal wall.

In the current case, the patient was diagnosed with Proteus syndrome based on certain diagnostic criteria and underwent an excision. The postoperative course was uneventful, the encasement of the left colon was improved, and she left the hospital on the 15th postoperative day. At present, she continues to receive medical treatment on an outpatient basis. Postoperatively, bowel movement occurred twice a day.

More information: Nakayama Y, Kusuda S, Nagata N, Yamaguchi K. Excision of a large abdominal wall lipoma improved bowel passage in a Proteus syndrome patient. *World J Gastroenterol* 2009; 15(26): 3312-3314 www.wjgnet.com/1007-9327/15/3312.asp

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