

Case 22 Abdominal bruising



Figure 22.1

A fit 72-year-old woman presented with a 12 h history of sudden onset severe abdominal pain radiating to her back. With the onset of the pain she collapsed, and on recovering could not stand without feeling faint. On presentation the following day she had developed bruising of the abdominal wall (Fig. 22.1). She underwent a CT scan.

What are the two eponymous signs and what do they signify?

Cullen's sign and Grey Turner's sign. Thomas Cullen (1868–1953), a gynaecologist at Johns Hopkins, Baltimore, described a periumbilical bluish discoloration in a case of ruptured ectopic pregnancy in 1922. George Grey Turner (1877–1951), a surgeon from Newcastle upon Tyne and later the Royal Postgraduate Medical School, Hammersmith Hospital, London, described

lumbar discoloration as a feature of acute pancreatitis in 1920.

What conditions are they associated with?

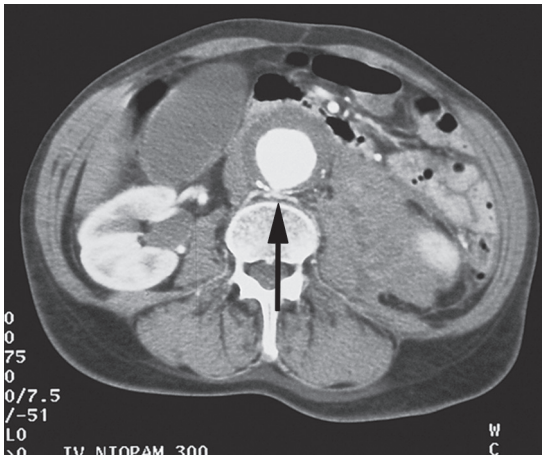
They are associated with causes of retroperitoneal haemorrhage, such as acute haemorrhagic pancreatitis, ruptured abdominal aortic or iliac aneurysm and ruptured ectopic pregnancy.

This patient underwent a plain X-ray and CT scan. What do they show and what is the diagnosis?

The abdominal X-ray shows absence of the left psoas shadow and the descending colon stretched laterally (Fig. 22.2a). The CT scan shows a 6 cm abdominal aortic aneu-



(a)



(b)

Figure 22.2 (a) Plain X-ray, (b) CT scan of the patient.

rysm with a rind of thrombus (called mural thrombus) around the lumen, which is white due to the administration of contrast medium (Fig. 22.2b). The rind is deficient posteriorly, the site of a rupture (arrowed). There is extensive haemorrhage around the lower pole of the left kidney and the descending colon is seen displaced posterolaterally around the haematoma. She has suffered a ruptured abdominal aneurysm with a contained retroperitoneal haematoma.