INTRODUCTION

"Volvulus may be defined as an obstruction caused by a twisting of the bowel upon itself so that it's lumen is closed by the pressure of a part of the intestine continuous with it or it's mesentary (Traves, quoted by Catch W.D.). Clinically the term volvulus means a torsion of the bowel on its mesentary.

Since 1936, when Von Kochitansky for the first time described a case of volvulus, voluminous work has been done over the problem, but still a definite treatment for acute volvulus of sigmoid colon and volvulus of cecum and ascending colon is controversial.

In India, volvulus of small bowel is a common cause of intestinal obstruction as compared to sigmoid volvulus (Sanejji 1950, Kochan, and Singh 1966). Volvulus of sigmoid colon is less common in India as compared to western countries. Incidence in India is less than 10% (Ojha 1950, Sankaran 1962, Jain & Seth 1966), while incidence in East European countries and Germany is 30-50% (Persmann & Brauna and Wortman quoted by Bacon). Acute volvulus of the cecum is a relatively uncommon condition. It must be appreciated that the term does not describe the condition aptly, as in
addition to the caecum, a variable portion of the ascending colon and of the terminal ileum are found to be involved in the process. The first case of volvulus caecum was reported by Rakitsky in 1841. Its incidence, as recorded in western literature is less than 1% of all acute intestinal obstruction.

Volvulus of sigmoid colon is much commoner in the aged and fragile persons, and this factor is likely to sway the surgeon's choice of operative procedures.

Volvulus sigmoid colon constitutes one of the commonest condition amongst causes of acute intestinal obstruction with which the surgeon is confronted. Thus is more common in Eastern European countries, Scandinavia, and Peru, and accounting for 30-50% of all intestinal obstruction in Russia, Germany & Scandinavia. In India, sigmoid volvulus is common in certain states e.g. North Bihar, South India, Western U.P., Rajasthan and Madhya Pradesh.

Volvulus of small bowel is one of the commonest condition amongst intestinal obstruction. In western countries, it constituted 26% to 48% of all the cases of intestinal obstruction (Cookins 1936, No Walters 1945). In India it constitutes 7.5% to 16% in most of the series (Ophe 1950, Anderson 1954, Bhansali and Sethna 1970, Rao 1954 Tmcia 1962).
In the embryologic development of the intestinal tract, the cecum and the right colon move across the abdomen from left to right to a position in the right lower abdomen where they become fixed. Incomplete peritoneal fixation of the right colon to the posterior abdominal wall results in mobile cecum and ascending colon, which may become twisted and gives rise to development of cecal volvulus leading to acute intestinal obstruction, if not treated early may be fatal to the life of the patient. One of the aim of this study is to find out the prevalence of mobile cecum in Bundelkhand region.

Incidence of small bowel volvulus is significantly high after some abdominal operation (Venn and Muruvilla 1966, Hill 1966 Herbst and Morton 1950, Anderson 1954). True recurrence after reducing the volvulus by operative method, is low. Mortality rate is high between 25% to 50% (Leonard and Berow 1938, Szajdb 1949). With viable colon, mortality rate is between 5% to 20% while with nonviable bowel it is between 40-60%.

Mortality rate of the recorded cases of volvulus of cecum and ascending colon was 35% in Winshaw and Carter series (1953). This high mortality
rate is due to a sudden onset of gangrene in acute fulminating type of cases.

Being such an important problem, which is a threat to the life of the patient the work done in this field is controversial and it requires constant study and management. With this purpose, this study is being undertaken to assess the clinical problems and evaluate the various types of treatment, particularly primary resection of the sigmoid colon and sigmoidopaxy for sigmoid volvulus, and tube cassoctomy for caecal volvulus. Alongwith this the study is extended to evaluate the incidence of mobile cæcum in Bundelkhand region.