A 17-year-old woman presented to the emergency department after one day of abdominal pain, with diarrhea and hematochezia. Contrast-enhanced computed tomography showed colo-colic intussusception and enlarged ileocecal lymph nodes (Fig. 1). Colonoscopy was performed to find the cause, and the intussusception was easily reduced by insufflation of carbon dioxide (CO2). The procedure revealed the diffuse edema and erythema of the ascending colon and significant mucous membrane swelling with pus formation in the cecum (Fig 2). Her stool culture was positive for enterohemorrhagic Escherichia coli (E. Coli) O-157:H7, and the pathological finding of the biopsy in the cecum revealed only inflammatory change and no tumor cells. She was discharged without recurrence or complications.

Bacterial enteritis can cause intussusception presumably by edematous and ischemic changes in the intestinal mucosa. However, the precise etiology remains unknown. It has been reported that 8 (1.9%) of 425 patients with hemorrhagic colitis developed intussusception [1]. Colonoscopy is useful for the diagnosis and reduction.

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**Conflicts of interest:** None to declare.

**REFERENCES**