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Case Report

A Rare Case of Appendicities

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Abstract: We present a rare case of 30 year old female presented with chronic lower abdominal pain mainly in suprapubic and right iliac fossa. Diagnostic laproscopy was done and found 23 cm inflammed appendix involving the right iliac fossa, suprapubic region and part of left iliac fossa.
Keywords: Appendicities, Diagnostic laproscopy, lower abdominal pain

INTRODUCTION:

Appendectomy is the most common emergency surgery performed worldwide [1]. Appendicities can present clinically according various position of appendix like retrocecal, Pelvic, Subcecal, Paracecal, Preileal or Postileal & subhepatic [2-4]. The length of appendix removed from a living person has been 26 cm, 20.5 cm, 18.2 cm and 17.5 cm. Boddeti RK etal removed 28 cm long apendix from a cadaver [5].

CASE REPORT:

A 32 year old female presented with chronic lower abdominal pain of 1-1.5 years. There was no history of urinary and menstrual complaints. There was no significant past history. General examination was normal. On abdomeninal examination, abdomen was soft and there was tenderness in right iliac fossa and suprapubic region. ultrasonography abdomen and pelvis was normal and it was done 3-4 times during the course of 1 year as adviced by different general practitionors. Her blood investigations and urinalysis was normal. CT abdomen and pelvis was advised but patient was not willing for the same due to financial concern.

Diagnostic laproscopy was done. Intraoperative finding was 23 cm inflammed appendix involving the right iliac fossa, suprapubic region and part of left iliac fossa. Other abdominal and pelvis findings were normal. There was little difficulty in handling and separating the long appendix laparoscopically but managed successfully. Laproscopic appendectomy was done. The post operative course was uneventful. Histopathology report shows features of chronic appendicities. The patient was discharged on 3rd post operative day.

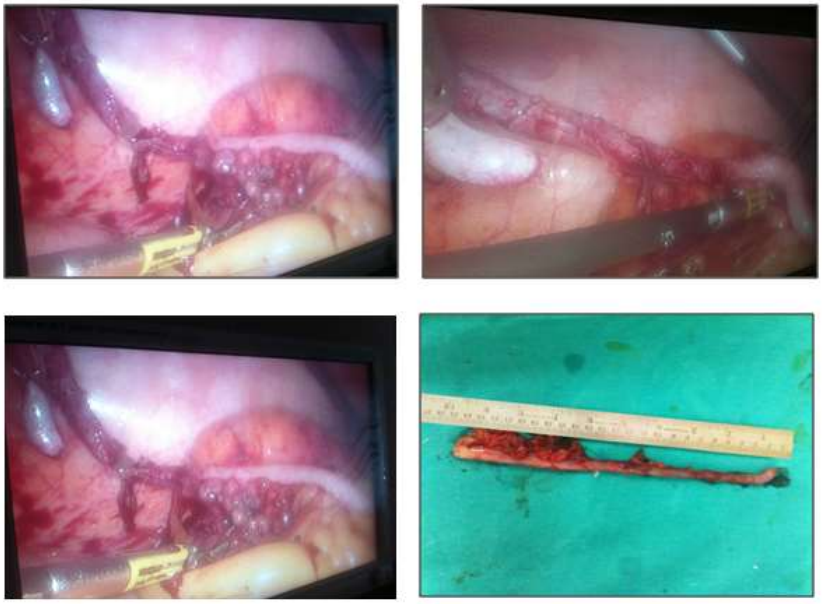

Fig 1, 2, 3 & 4: Inflamed long appendix

DISCUSSION:

Appendix can have various sizes and positions. The average length of the appendix is 4.5 cm in neonates and 9.5 cm in adults, but this may vary between 2 cm to 20 cm. Charles McBurney described the classical presention of appendicities with point of maximum tenderness. Appendicities classicaly present with periumbilical pain, nausea, migration of pain to the right lower quadrant, and later vomiting with fever but it may present differently due to different positions of appendix leading to difficulty in diagnosis. Common causes of appendicities include fecolith, stricture, carcinoid tumor, pin worm etc [6]. The treatment of chioce is appendectomy.

Literature also suggest the appendix length correlated highly signifiantly with body weight [7]. There are various case reports in literature with various length of appendix has been removed by open appendectomy. The clinical presentation of appendicitis may varries and confuse manytimes even to experienced surgeon. In our case, patient presented with chronic lower abdominal pain managed conservatively many times by general practitioners. Ultrasound, blood investigations and urine analysis were normal. Our case result also suggest the importance of diagnostic laparoscopy in chronic abdominal pain. Various length of appendix was removed previously by various authors by open surgery. There was little difficulty in handling the long appendix laparoscopically but was managed successfully.

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