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Case Report

A Rare Intra-Operative Sighting of Appendiceal Diverticulitis

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ARTICLE INFO

Article history:

Received: 3 July, 2020

Accepted: 13 July, 2020

Published: 18 July, 2020

Keywords:

Appendiceal diverticulitis

ABSTRACT

Appendiceal diverticulitis is a rare diagnosis and culprit for acute appendicitis. The majority of these cases are diagnosed post-operatively on histopathology. In the following case it was grossly identifiable intra-operatively. Our treatment was appendicectomy. The purpose of this article was to provide pictorial evidence of this exceedingly rare intra-operative finding.

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Case Description

A 25-year-old female presented with a 4-day history of lower abdominal pain, accompanied by nausea and anorexia. On examination, she was tender in the right iliac fossa and guarding was present. Blood tests revealed raised inflammatory markers. The patient underwent diagnostic laparoscopy, which revealed an oedematous appendix with an injected serosa. Multiple diverticulae were visible along its surface (Figure 1). Appendicectomy was performed accordingly. Histopathological analysis confirmed a diagnosis of appendiceal diverticulitis. Her recovery was uneventful.



Figure 1: Gross appendiceal diverticulae detected intra-operatively.

Appendiceal diverticulitis is a rare pathology. The reported incidence of this discrete clinical process is 0.2%. It carries an earlier and higher rate of perforation (at least 4 times) compared to simple appendicitis. Accordingly, it carries a higher mortality (30-fold) [1]. Although diagnosis can be suspected on radiographic imaging or upon gross inspection of the specimen, histopathological confirmation is required to make a formal diagnosis. It can be categorised into 4 main subtypes according to the microscopic findings [2]. Our case is consistent with type 2 – inflammation of the diverticula with surrounding appendicitis.

Learning Points

- Appendiceal diverticulitis is a rare but important clinical diagnosis the clinician should be aware of.
- It carries an early and higher rate of perforation compared to acute appendicitis.

Conflicts of Interest

None.

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