

APPENDICEAL MUCOCELE – CLINICAL CASE

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Introduction

Appendiceal mucocele is a rare surgical emergency, which poses special problems of diagnosis and treatment. Macroscopically it shows a distended appendix of mucus. The diagnosis is made based on imaging examination, intraoperatively and exclusively histopathologically. There is a slight prevalence in females and it has a frequency of 0.2-0.3% of all appendectomies.

Keywords

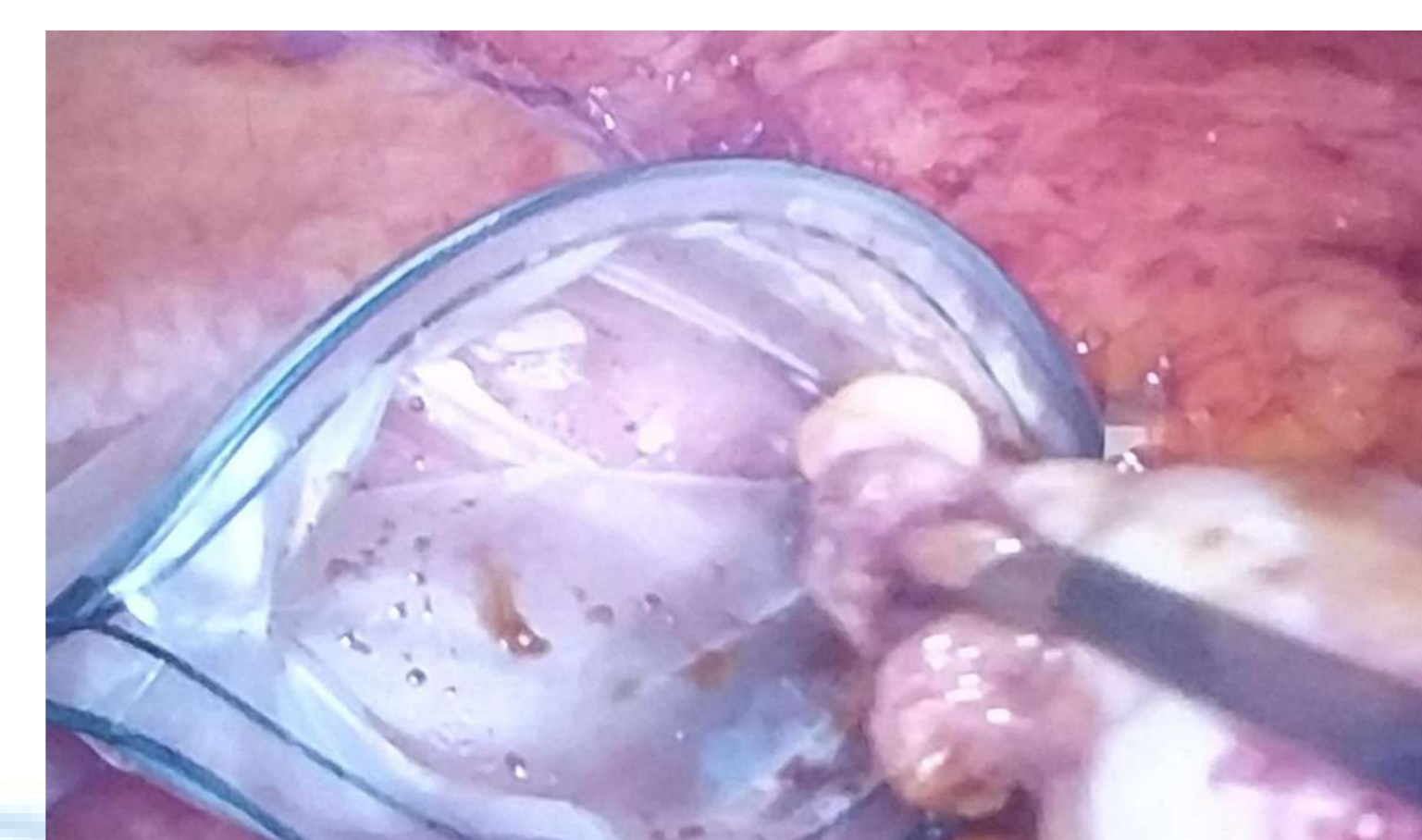
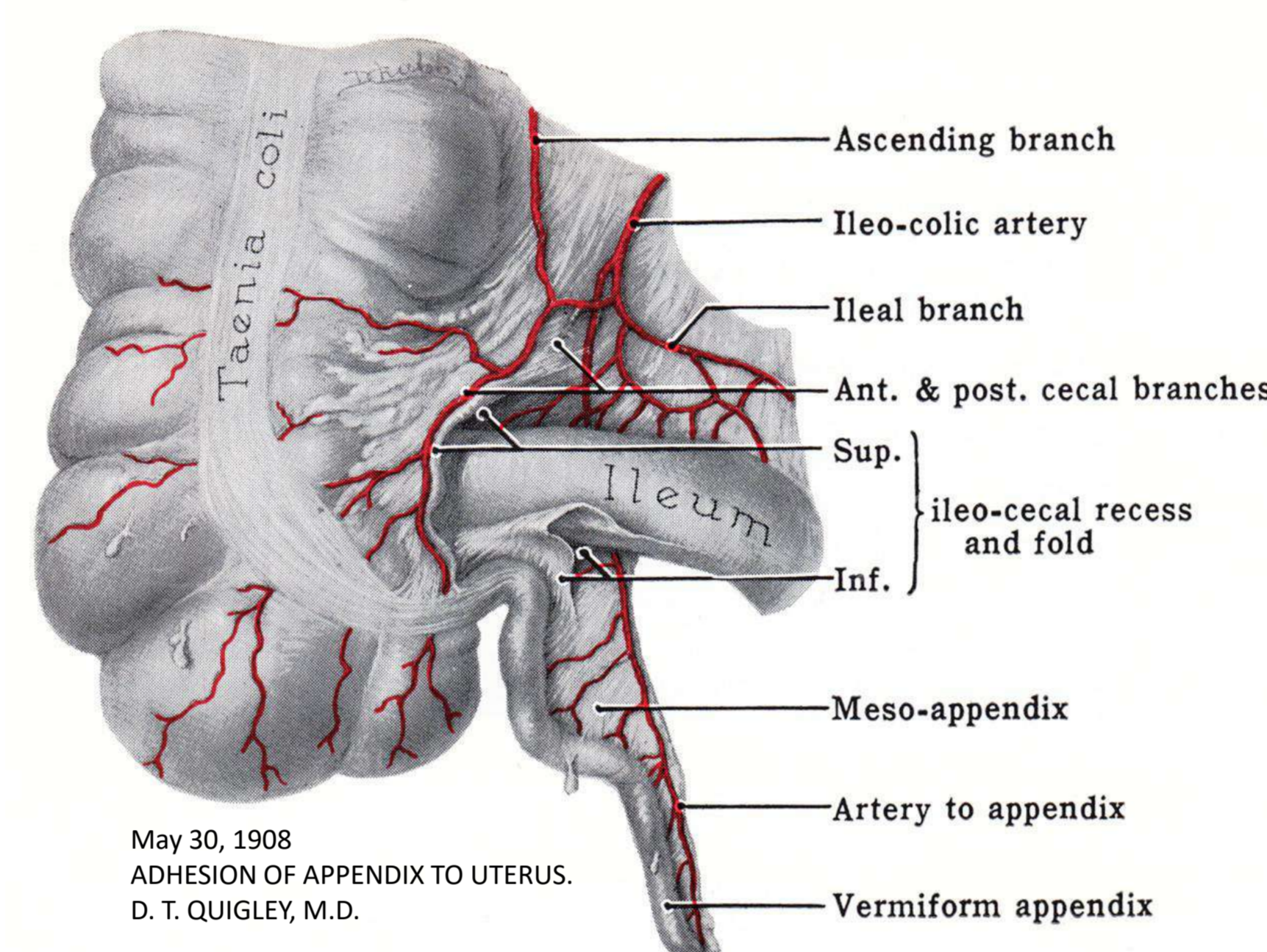
Appendiceal mucocele, diagnosis, treatment

Purpose

The aim of the study is to present the clinical and paraclinical characteristics and treatment features of the appendiceal mucocele.

ANALIZE	REZULTATE	INTERVAL DE REFERINȚĂ
Dozarea hemoglobinei	135.00	120-140 · g/l (Ser)
Numărătoarea eritrocitelor	4.40	3,7-4,7 · 10 ¹² /L (Ser)
Indice de culoare	90.50	78,6-102,2 · fl (Ser)
Hematocritul	39.80	36-42 · L/L (Ser)
Numărătoarea trombocitelor	206.00	128-434 · 10 ⁹ /L (Ser)
Numărătoarea leucocitelor	7.10	4-9 · 10 ⁹ /L (Ser)

ANALIZE	REZULTATE	INTERVAL DE REFERINȚĂ
Dozarea proteinei totale	71.00	65-85 · g/l (Ser)
Dozarea ureei	6.50	2,8-8,3 · mmol/l (Ser)
Dozarea creatininei în ser	76.00	44-115 · mkmol/l (Ser)
Dozarea bilirubinei	10.00	5-21 · mkmol/l (Ser)
Dozarea bilirubinei conjugate	2.00	0-5 · mkmol/l (Ser)
Bilirubina liberă	8.00	5-16 · mkmol/l (Ser)
Dozarea glucozei	5.80	3,5-6,2 · mmol/l (Ser)
Dozarea alaninaminotransferazei	17.00	0-40 · U/e (Ser)
Dozarea aspartataminotransferazei	18.00	0-40 · U/e (Ser)



Material and methods

We present the case of a 67-year-old female patient, treated laparoscopically in PHI EMI from appendiceal mucocele. The disease started 2 days earlier with abdominal pain syndrome. From the patient's reports, it appears that she consulted a doctor two months ago for episodes of insignificant abdominal pain with a variable duration of 1-2 days, which spontaneously gave way to hygienic-dietary treatment measures. The patient was not examined clinically and paraclinically.

Results

At admission the patient did not show signs of acute surgical pathology. An abdominal ultrasound showed a tumor formation, with a cystic character, with a diameter of 66x74mm in the right iliac fossa. Colonoscopy ruled out the malignant pathology of the rectum. The blood count and urine test showed no changes. The treatment option was the surgical one - laparoscopic appendectomy with special caution in order to prevent contamination of the peritoneal cavity, the appendix being externalized in a protective container. The postoperative evolution was favorable, the patient being discharged on the 7th postoperative day. Histopathological examination confirmed the diagnosis of appendiceal mucocele.

Conclusions

Appendiceal mucocele is a rare surgical condition, with nonspecific symptoms, the high degree of suspicion of neoplastic processes causing the need for a detailed paraclinical examination. Imaging investigations (ultrasound, CT) are conclusive in making a positive diagnosis. The therapeutic attitude is the surgical one, and the histopathological data allow the confirmation of the diagnosis, also drawing objectives for the subsequent monitoring of the patient in dynamics.

