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Recurrent pain abdomen following appendectomy: Stump appendicitis, a surgeons' dilemma

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A 35 year female presented to our hospital with recurrent pain in right lower abdomen for four months which had increased in intensity in the last 24 hrs. She used to have on and off passage of altered blood in stool during previous attacks of pain but absent on this presentation. She had undergone open appendectomy four and half months back at another center. Her last pain episode was one month ago and was diagnosed as ileocolic intussusception and was managed conservatively at another center without an adverse outcome. On clinical examination, the patient was afebrile and her vital signs were otherwise normal. Physical examination revealed a tender mass in right iliac fossa of 3X2 cm₂ without evidence of guarding, rebound tenderness, or other peritoneal signs. Routine laboratory studies were remarkable for a WBC count of 10,000/ mm₃ with 88% neutrophils. Urinalysis was negative. An ultrasound of the abdomen and pelvis was performed which showed invagination of one bowel loop into another bowel loop with characteristic target sign which suggested the preoperative diagnosis of ileocolic intussusception. Exploratory laparotomy with a lower midline incision was done under general anesthesia. The operative findings were adhered inflamed omentum forming a lump over the ileocecal junction with inflamed surrounding mesentery and acutely inflamed stump of appendix (~2 cm). Rest of the bowel was normal. Completion appendectomy was done and the post-operative period was uneventful. The patient was discharged on post-operative day four and is asymptomatic till date. Her histopathological report showed acutely inflamed appendix.

Biography

Tuhin Shah has completed his MS in General Surgery from BP Koirala Institute of Health Sciences, Nepal. He is currently a Senior Resident and presented a few papers in the national conference and the scientific sessions held in Nepal.

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