

Diverticular Acute Appendicitis: Rare Pathological Entity

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1. Clinical Image

Appendiceal diverticular disease is a rare entity. It was first described by Kelynak in 1893 [1].

Acute appendiceal diverticulitis is reported as a rare cause of appendicitis with a frequency between 0.004% and 2.1% [2]. Appendiceal diverticulitis may mimic acute appendicitis; however it occurs in relatively older age (43 vs 29 years [3]).

A 37-year-old male presented to the emergency department with a 1-day history of right lower quadrant pain, associated with fever, nausea and anorexia. There was no change in urine, weight loss or change in bowel habits.

Clinical examination showed overweight (body mass index 28kg/m²) male with body temperature of 37.8°C and tenderness in the right lower quadrant abdomen. Also, there was leukocytosis (12.57 × 10⁹; neutrophils 78%). Acute appendicitis was suspected and a surgical approach was chosen with a McBurney access.

The removed specimen (Figure 1 and 2) was 7 cm long with multiple hyperaemic and oedematous diverticular protrusions. Discharging was on 2th postoperative day in optimal clinical conditions.

The histological examination showed acute appendicular diverticulitis with periappendicitis.



Figure 1 and 2: Intra operatively aspect of the appendix with visible diverticula.

References:

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2. B Abdullgaffar. Diverticulosis and diverticulitis of the appendix. Int J Surg Pathol. 2009; 17: 231-7.
3. I Yamana. Clinical characteristics of 12 cases of appendiceal diverticulitis: a comparison with 378 cases of acute appendicitis. Surg. Today. 2012;42:363-7.