



IMAGE OF THE MONTH

Acute appendicitis secondary to foreign body ingestion*

Apendicitis aguda secundaria a ingesta de cuerpo extraño

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The ingestion of foreign bodies in adults is a rare or accidental occurrence, more common in prisoners and patients with psychiatric disorders.¹ Concomitantly, the likelihood of their causing acute appendicitis is very rare. They are objects that tend to pass spontaneously through the gastrointestinal tract, especially blunt ones.^{1,2} The prevalence of acute appendicitis due to foreign bodies, such as needles, piercings, teeth and even buckshot, is 0.0005%.² Furthermore, if the lumen of the appendix becomes obstructed by them, the likelihood of developing acute appendicitis is <1%.³

We present the case of a 60-year-old man with a history of arterial hypertension and coronary angioplasty after a heart attack. The patient is a keen hunter. So he consumes game meat that sometimes contains buckshot.

He went to the A&E eight days after the onset of pain in the right iliac fossa (RIF), without other symptoms. On examination, pain was noted in the RIF with voluntary guarding, without peritoneal irritation. Analysis without elevation of inflammatory parameters and ultrasound of the

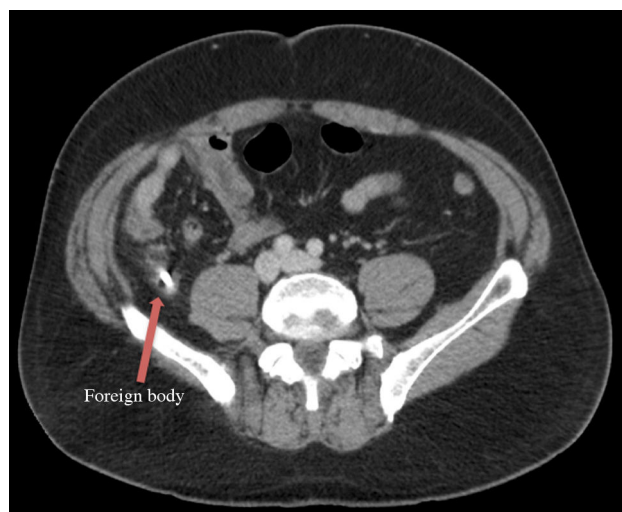


Figure 1 Abdominal CT scan: a metallic foreign body can be seen in the caecal appendix with associated inflammatory changes consistent with acute appendicitis.

abdomen with an aperistaltic, non-compressible appendix with associated appendicular mass. A CT scan was requested to complete the study of the appendicular mass. Acute appendicitis was reported and a metallic foreign body was observed inside the appendix (Fig. 1). A laparoscopic

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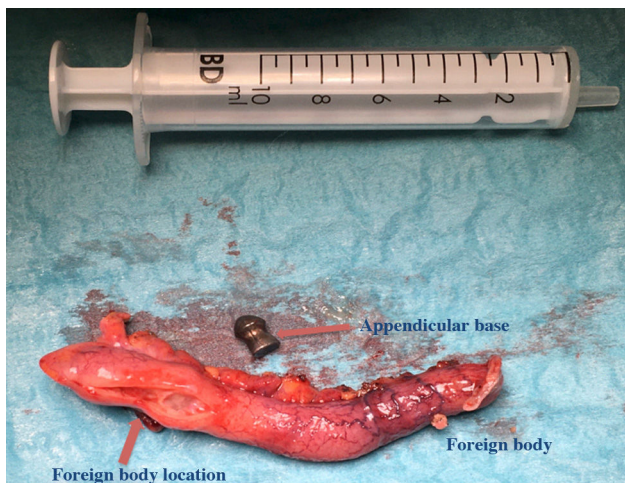


Figure 2 Surgical specimen: a caecal appendix is observed with an incision in its distal third from which a metallic foreign body (buckshot) was removed.

appendectomy was performed in which acute gangrenous retrocaecal appendicitis was observed. When the appendix was opened during surgery, buckshot was found in the distal third of the lumen (Fig. 2).

References

1. Sama CB, Aminde LN, Njim TN, et al. Foreign body in the appendix presenting as acute appendicitis: a case report. *J Med Case Rep.* 2016, <http://dx.doi.org/10.1186/S13256-016-0922-7>.
2. Kim JH, Lee DS, Kim KM. Acute appendicitis caused by foreign body ingestion. *Ann Surg Treat Res.* 2015, <http://dx.doi.org/10.4174/astr.2015.89.3.158>.
3. Abellán I, Ibañez N, Vergel R, et al. Acute appendicitis caused by a foreign body. *Cirugía Española (English Ed.).* 2019;97:347–8, <http://dx.doi.org/10.1016/j.cireng.2019.05.008>.