

A Case of the 10 days

Case 357

This week, we present a patient with perforated appendicitis whose CT images were misinterpreted as infectious ileitis. A twelve-year-old girl came to our hospital with her mother for vomiting and abdominal pain. Laboratory test revealed white blood cells 11500/mm³, leukocytes 89.1%, CRP 0.15 mg/dL. She took abdomen CT (Figs. 1-3). The following day, medical findings and laboratory test indicated positive Blumberg sign, and white blood cells 12680/mm³, leukocytes 92.5%, CRP 12.11 mg/dL. She took abdomen contrast-enhanced abdomen CT (Figs. 4, 5).

Case 1

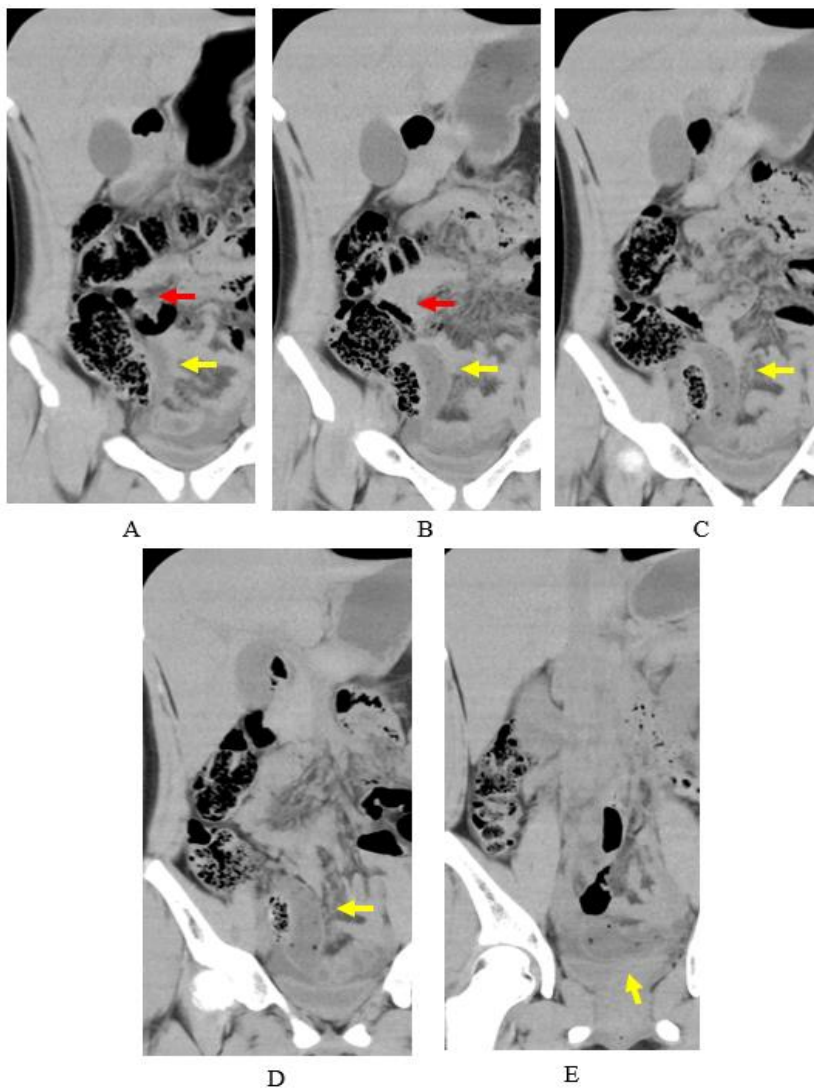


Fig.1 Case 1. Swollen appendix (red arrow) and ileum end (red arrow) are depicted on coronal CT (A-E). Virtually, swollen appendix was misinterpreted ileum end. The real ileum end was ignored as distal ileum adjacent to ascending colon.

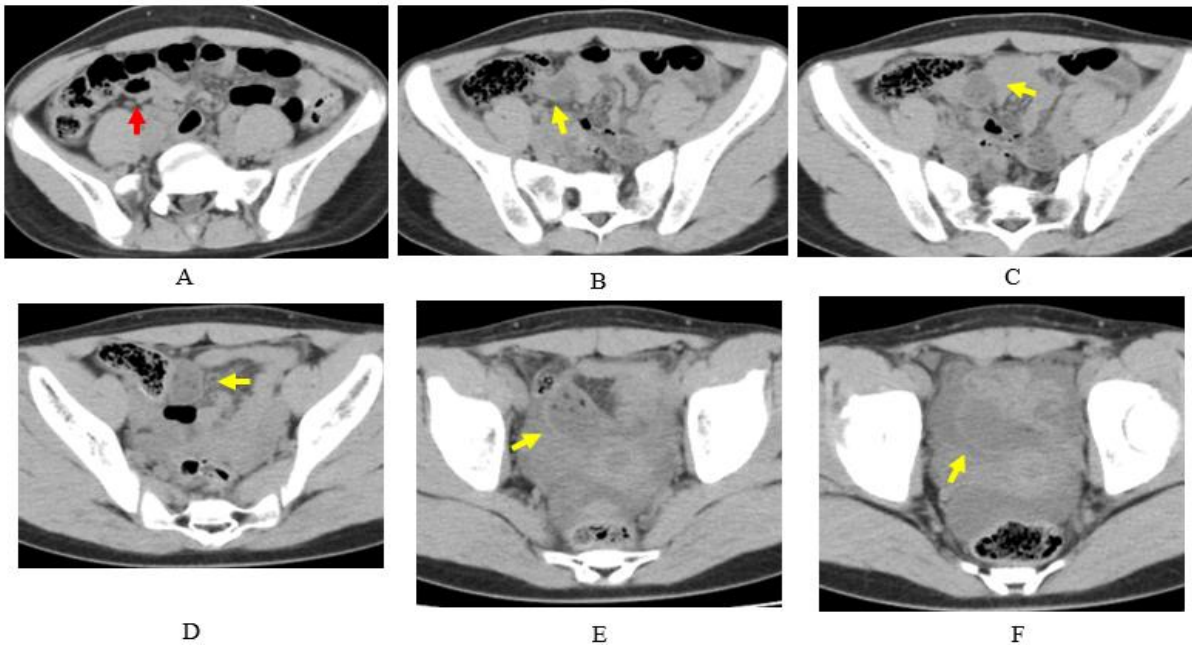


Fig. 2 Case1. Ileum end with gas inside (A) and swollen appendix (B-F) are depicted on axial CT. Virtually, swollen appendix was misinterpreted ileum end. The real ileum end was ignored.

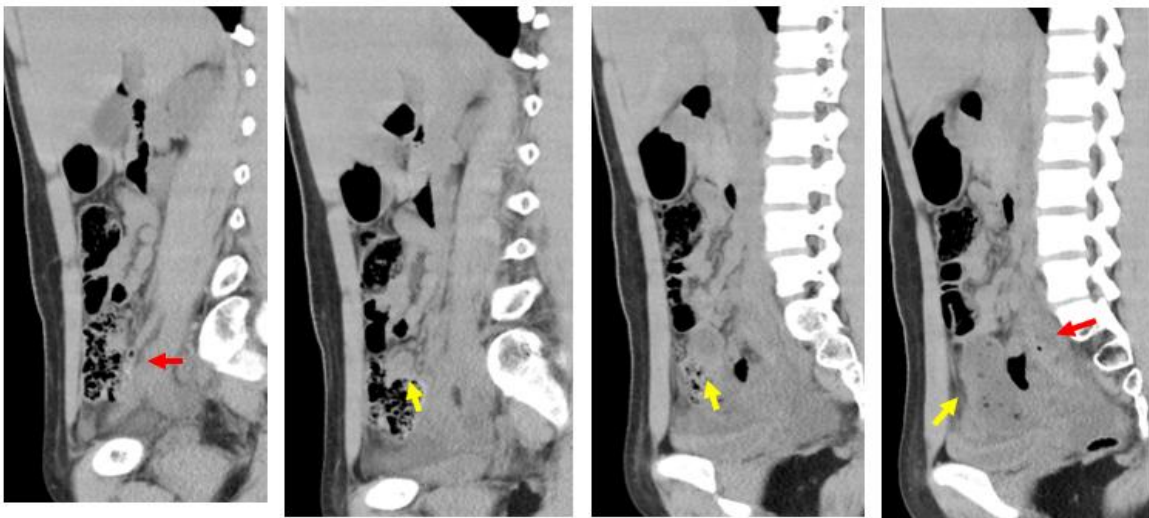


Fig. 3 Case 1 Swollen appendix (yellow arrow) and small tube including gas (red arrow) are depicted on sagittal CT. Small tube including gas was misinterpreted normal appendix.

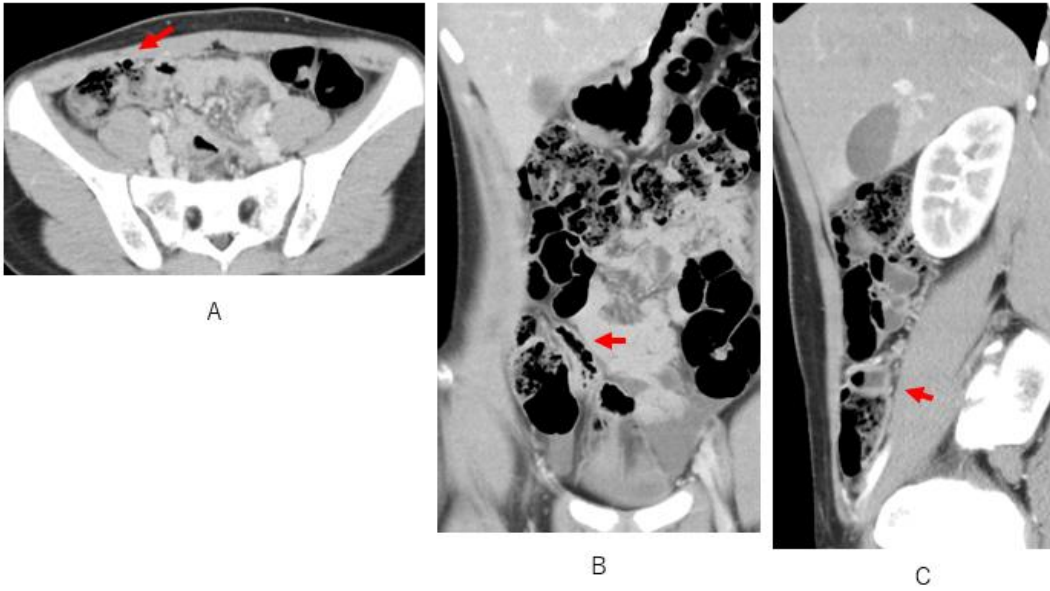


Fig.4 On the following day, ileum end (red arrow) is depicted on axial (A), coronal (B) and sagittal (C) CT.

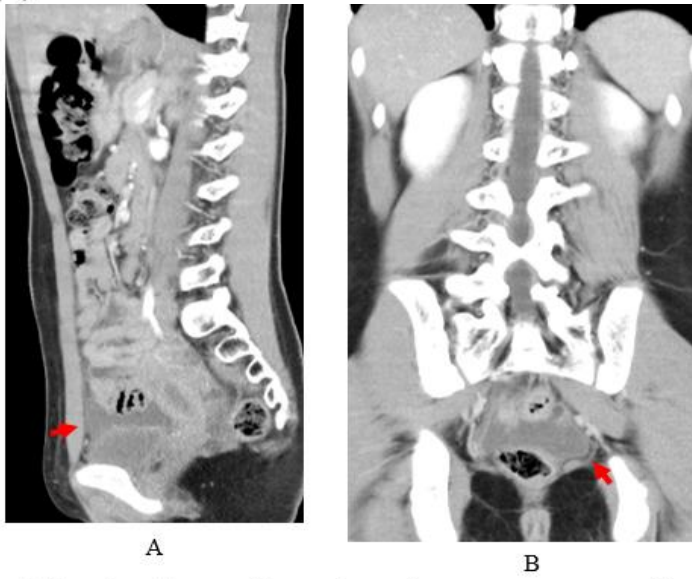


Fig.5 On the following day, ascites volume increases compared to the previous day.

Case 2

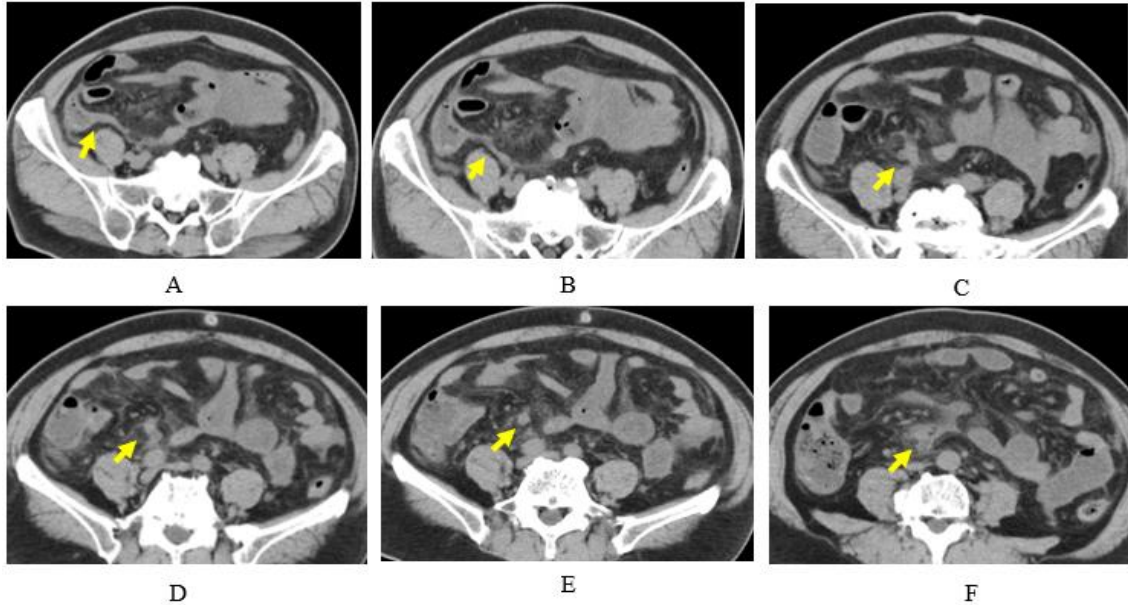


Fig 6. Case 2 Appendix origin and body is depicted normal form (A-C), gradually mural-swollen (D, E) and appendix tip is finally swollen with dirty mesoappendix, indicating peritonitis (F).

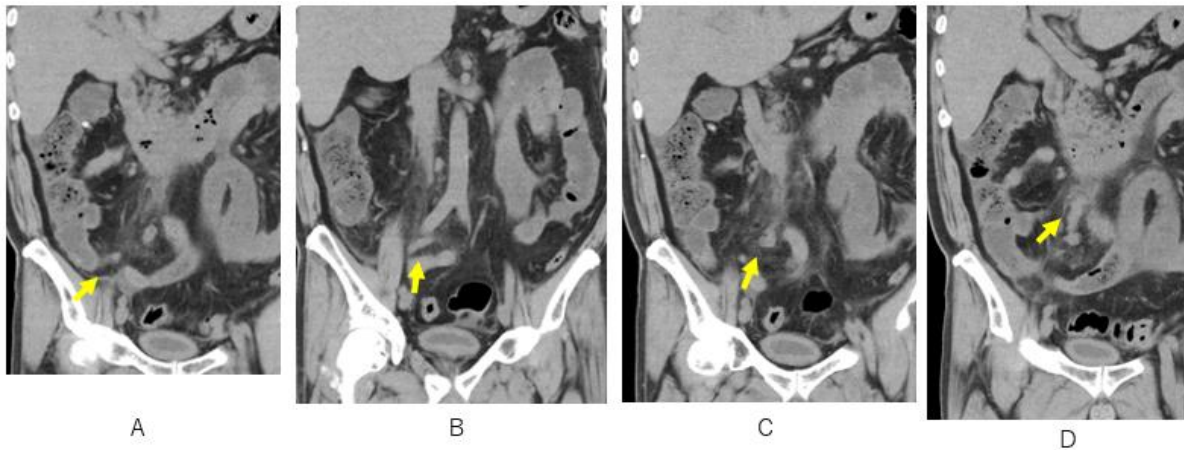


Fig. 7 Case 2 Appendix origin and body is depicted normal form (A, B), gradually mural-swollen (C) and appendix tip is finally swollen with dirty mesoappendix, indicating peritonitis (D).

What is imaging diagnosis?

- 1. Acute appendicitis**
- 2. Infectious ileitis**
- 3. Constipation**
- 4. Chron disease**

answer

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