A Case of a Giant Appendicolith

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Clinical Image

Figure 1: (a) Calcification and laminar structure in an inflamed appendix. Coronal view (b) Axial view.

Clinical Image

A 33-year-old male was admitted in the emergency department with generalized abdominal pain for 3 days. No other complaints. Past medical history was unremarkable. Vital signs were normal. Subtle tenderness was present at lower abdominal quadrants. Laboratory: CRP of 7 mg/dL (Normal<0,1 mg/dL), leucocyte count of 18,000 cells /mm³ (Normal: 4000-10000 cells/mm³). A CT scan showed an appendicolith with 26 × 21 mm (Figure 1a and 1b). At laparoscopy a gangrenous perforated appendicitis with localized peritonitis was found. An uneventful appendectomy was performed.

Microbiology showed E. coli, Pseudomonas aeruginosa, Enterecoccus faecalis and Streptococcus viridans. The patient was discharged 5 days later.

Appendicoliths are a rare etiological factor of appendicitis [1]. They are formed by conglomerates of fecal matter with mineral deposits [2]. These may present with homogeneous or laminated calcification. Giant appendicoliths (> 2 cm) are very rare, the largest one as 3 × 2.5 cm. To our knowledge only twelve cases were reported in the literature [3,4].

Keywords: CT scan; Leucocyte; Appendicoliths

Declaration of Interests

The authors declare that they have no competing interests.

References


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