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(CASE REPORT)

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Appendicular Syndrome revealing ileal duplication (case report)

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Abstract

Introduction: Digestive duplications are rare congenital malformations in children, albeit not uncommon, characterized by a wide range of pathogenic, clinical, and histological variations. A definitive diagnosis relies on preoperative examination of the lesion followed by anatomopathological confirmation.

Objective of this study was to investigate the epidemiological, clinical, and paraclinical aspects of digestive duplications, as well as their management and postoperative evolution. Herein, we present a case of ileal duplication in a 9-year-old child admitted with symptoms suggestive of appendicular syndrome, which was successfully managed with surgical treatment.

Observation: The patient, a nine-year-old child, presented with symptoms consistent with appendicular syndrome. Abdominal ultrasound revealed indirect signs of appendicitis, along with minimal fluid collection in the right lower abdomen. Further exploration unveiled a mesenteric cystic mass comprising two portions, one of which was necrotic, while the appendix appeared normal. Subsequent resection of the mass was performed, and histopathological examination confirmed ileal duplication. The postoperative course was uneventful.

Conclusion: Digestive duplications are rare malformations that should be considered, particularly when encountering digestive symptoms. Surgical excision remains imperative to prevent complications in an otherwise benign condition.

Keywords: Duplications; Digestive; Congenital malformations; Syndrome

1. Introduction

Digestive duplications are rare congenital malformations in children but not uncommon, characterized by a wide pathogenic, clinical, and histological polymorphism. Positive diagnosis relies on preoperative examination of the lesion and anatomopathological confirmation.

The objective of this study was to investigate the epidemiological, clinical, and paraclinical aspects of digestive duplications, their management, and postoperative evolution. We report a case of ileal duplication in a 9-year-old child admitted with symptoms of appendicular syndrome, with a favorable outcome following surgical treatment.

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2. Observation

The patient is a 9-year-old child admitted with symptoms of appendicular syndrome. Two days prior to admission, he experienced right lower quadrant abdominal pain accompanied by unspecified fever. On clinical examination, the child appeared dehydrated (5%), had a fever of 39°C, and exhibited tenderness and guarding in the right lower abdomen, as well as generalized abdominal sensitivity. Laboratory tests revealed leukocytosis with a white blood cell count of 14,000/mm^3 predominantly neutrophils, and a CRP level of 74 mg/l.

Abdominal ultrasound showed indirect signs of appendicitis with minimal fluid collection in the right lower abdomen. Exploration revealed a mesenteric cystic mass consisting of two portions, one of which was necrotic, with a normal appendix (Figure 1: a,b). Resection of the mass was performed.

Histopathological examination of the surgical specimen confirmed ileal duplication. The postoperative course was uneventful.

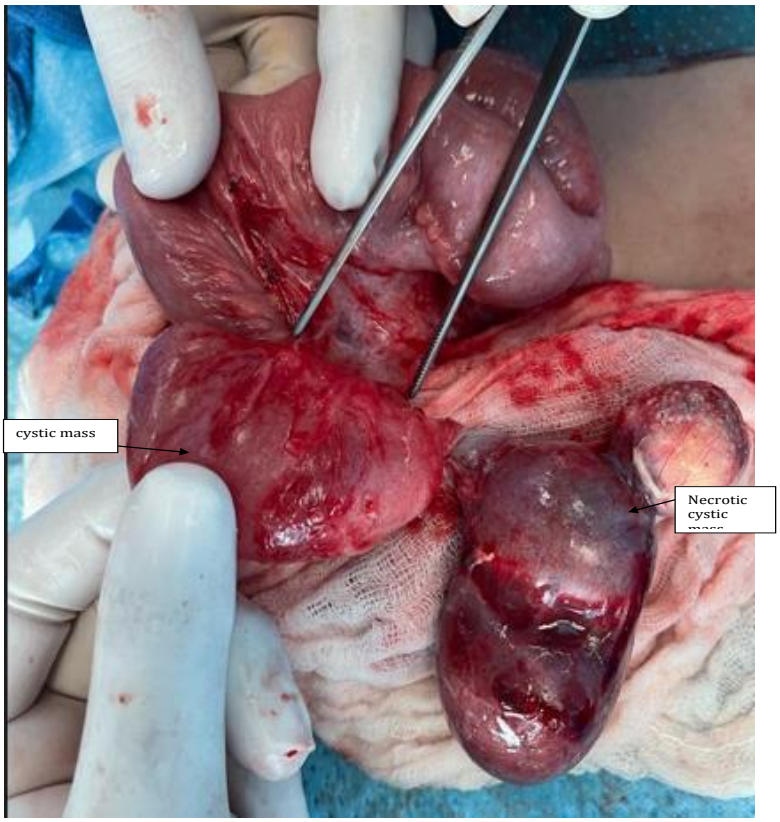

Figure 1a Mass consisting of two portions, one of which was necrotic

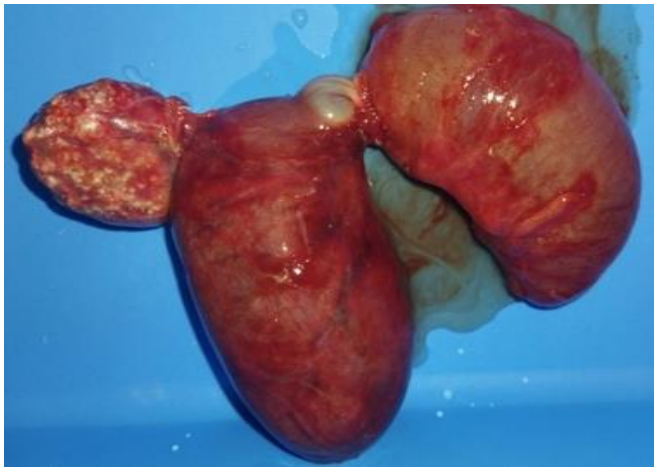

Figure 1b Mass consisting of two portions, one of which was necrotic

3. Conclusion

Digestive duplications are rare malformations that should be considered, especially in the presence of digestive symptoms. Surgical excision is necessary to prevent complications of an otherwise benign condition.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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