

Treatment and management of unexpected appendiceal tumours in RMMCH

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Abstract

Background: Appendiceal neoplasms are rare and most present unexpectedly as acute appendicitis. The classification and management are confusing, and there are few substantial reports in the literature.

Methods: A retrospective study was performed in RMMCH with 30 patients who were diagnosed with acute appendicitis and discovered to be appendiceal tumours. Patients were of the age groups ranging from 30 – 50 years.

Results: Appendiceal tumours account for 0.4 to 1 per cent of all gastrointestinal tract malignancies and are found in 0.7 to 1.7 per cent of appendectomy specimens. Carcinoid tumors are most common. Most are cured by simple appendectomy if the tumor is less than 2 cm in size and does not involve the resection margin or mesoappendix. Epithelial tumours may present with, or in time develop, pseudomyxoma peritonei, the optimal management of which involves complete tumor resection and intraperitoneal chemotherapy, usually available only in specialized centers.

Conclusion: It is noted that the most of the appendiceal neoplasms were diagnosed while treating for acute appendicitis, the signs and symptoms of appendiceal neoplasm were also as that of acute appendicitis and the method of management of neoplasm is chosen to be laproscopic appendectomy and it seems to have a slightly higher rate of inadequate resection compared to open appendectomy.

Keywords: Appendiceal tumours, management, appendectomy, Neoplasms

Introduction

Appendectomy is one of the most common abdominal operations accounting for >50% of emergency operations. This procedure is most often performed for the sudden onset of acute appendicitis. While evidence of the benefits associated with the laparoscopic approach continues to accumulate, an increasing number of appendiceal resections

are being performed via laparoscopy. Appendiceal tumors are rare entities, occurring in <2% of all appendectomies. They are rarely associated with clinical manifestations; therefore, they are usually discovered incidentally at the time of operation, frequently in association with acute appendicitis. As the technique of laparoscopic appendectomy evolves, the

feasibility of resecting appendiceal neoplasms via this approach should also be assessed. The aim of this study was to analyze the results of laparoscopic appendectomy for incidentally discovered appendiceal neoplasm in comparison to the classical open procedure. Laparoscopic appendectomy for appendiceal tumors seems to have a slightly higher rate of inadequate resection. However, it is not associated with a significantly worse patient prognosis than open appendectomy.

Materials and methods

This includes various studies on appendiceal neoplasms and their management through either medical or surgical procedures ,and retrospective study of 30 patients who were diagnosed to undergo laproscopic surgery in Rajah Muthiah Medical College And Hospital were selected .Neoplasms occurred in 0–5 percent of appendices. Ultrasonography or computed tomography is beneficial, but preoperative detection were rare. At operation, the diagnosis was considered in under half of cases. Mucocele, localized pseudomyxoma peritonei, benign tumours and most appendiceal carcinoids were cured by appendicectomy alone.

Discussion and results

Appendiceal mucinous neoplasms represent a relatively homogeneous group of neoplasms that pursue a predictable clinical course based on tumor stage and grade. Those confined to the appendiceal mucosa were cured by excision, whereas any proliferation of neoplastic epithelium beyond the mucosa placed the patient at risk for peritoneal dissemination. The histologic grade of peritoneal disease is extremely important. Patients with low-grade tumors may benefit from aggressive management, consisting of a combination of chemotherapy and cytoreductive surgery, whereas those with high-grade tumors probably do not

benefit from aggressive debulking but may be better served by systemic chemotherapy.

Table 1: Age group with frequency of patients.

Age group	Frequency	Percentage
31-40	17	65
41-50	13	35
Total	30	100

Table 2: Gender distribution.

	Frequency
Female	7
Male	23
Total	30

Review of the literature reveals that mucinous cystic neoplasms of the appendix continue to debatein their diagnosis and management. Abdominal pain is the most common presenting symptom. The recommended treatment of mucinous cystadenocarcinoma is a right hemicolectomy with debulking of any pseudomyxoma peritonei. In the reported literature, an approxmiately equal number of patients have been subjected to appendectomy alone versus right hemicolectomy. Survival rate has been shown to be superior after right hemicolectomy versus appendectomy alone.

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