Abstract 28.

Appendicular lymphoid hyperplasia, differential diagnosis of acute appendicitis: Ultrasound findings

Carolina Whittle, Lizbet Perez-Marrero, Marcela Cortés, Margarita Switt, Javiera Aguirre Fernández.

Clinica Alemana Santiago, Universidad del Desarrollo, Imágenes, Santiago, Chile

Presentado en 40th Post Graduate Course & 54th Annual Meeting of the European Society of Paediatric Radiology (ESPR), 18–22 junio 2018, Berlín, Alemania. Presentación oral.

Abstract

Objectives: To describe ultrasound (US) findings of lymphoid hyperplasia of the appendix (ALH). To report demographic data of patients with ALH operated for acute appendicitis (AA).

Materials and methods: Retrospective, descriptive and observational study. We reviewed biopsies reports of 694 consecutive cases of AA surgeries, who had previous US in our institution. All cases with histopathological ALH diagnosis were selected. Two US experts in consensus described US findings. Age and sex composition of this group were described.

Results: 25 ALH cases (3.8% of all appendectomies), 10 women and 15 men. The average age was 13 years (range 4 - 41 years), 36% under 10 years old and 84% under 20 years old. In all cases ALH was confirmed by biopsy. 22 cases of them without inflammation and 3 cases with associated inflammatory infiltrate of the appendix. The appendix was visualized by US in 22 cases. The average diameter of the appendix was 7 mm. US findings were increase in appendiceal diameter (82%), hypoechoic pseudonodular submucosal thickening (50%), concentric parietal thickening with endoluminal gas(13%), peri- appendiceal inflammatory changes(18%) and increased wall vascularization(4.5%). In 4 cases appendix was normal in US, 2 associated with intestinal intussusception.

Conclusion: ALH is frequent in children and can predispose to AA. Both pathologies can increase the appendiceal diameter. In the pediatric group, hypoecogenic pseudonodular submucosal thickening in absence of peri-appendiceal inflammatory changes can suggest AHL.