



# Perforated appendiceal mucocele

Case report

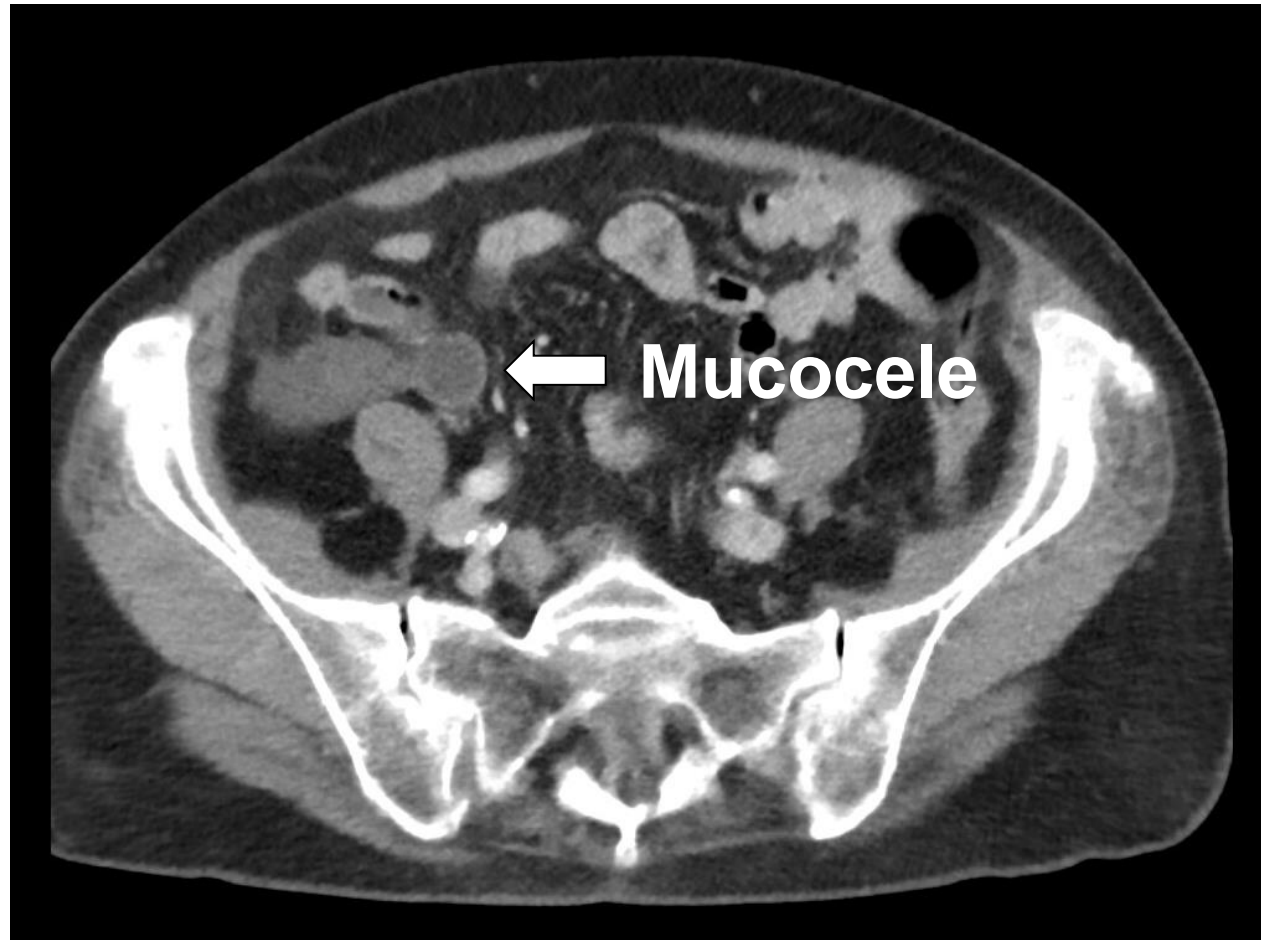
# Anamnesis

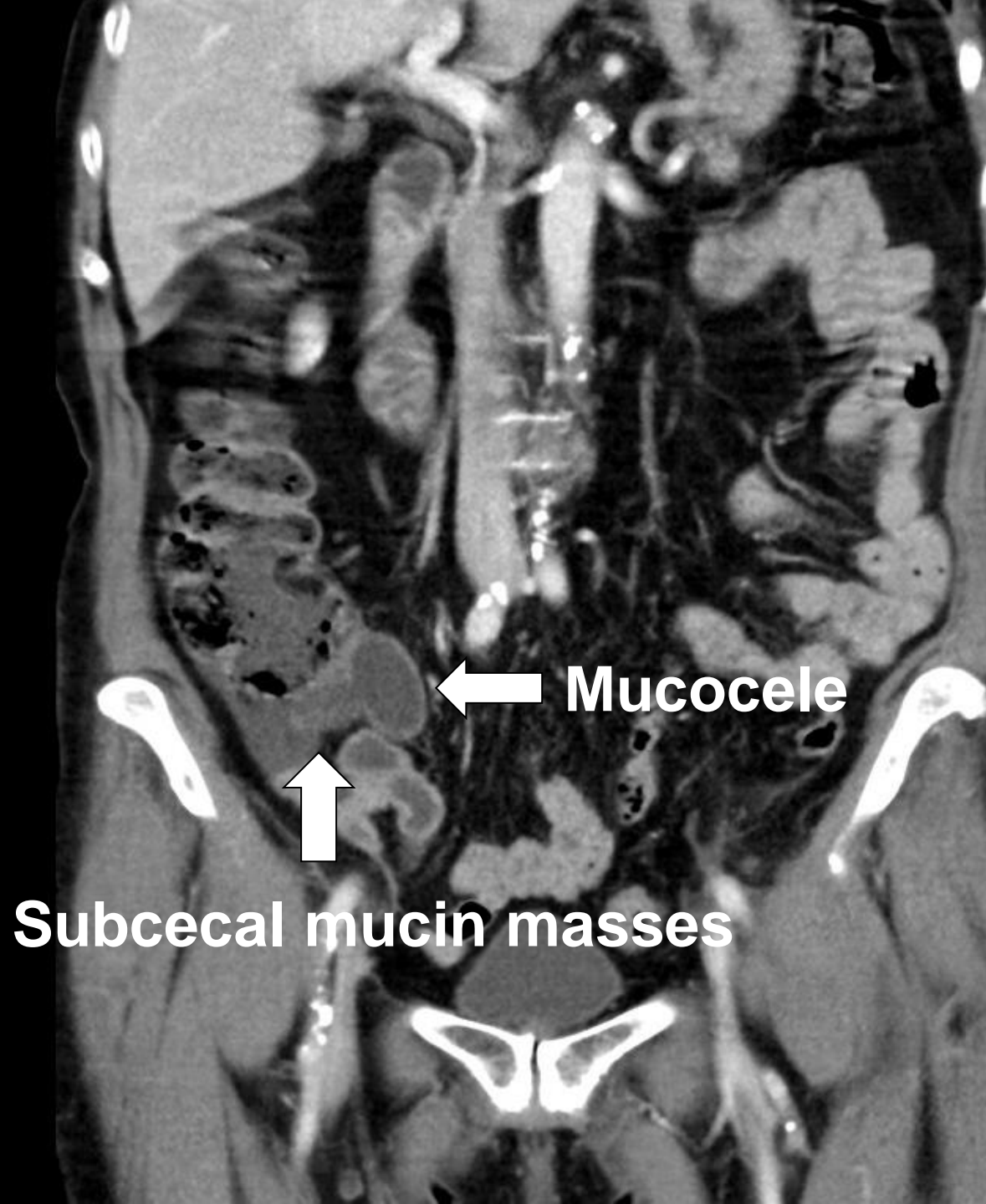
- 80 years old female patient
- Chronic pain in right hypogastrium (1+ years), intermittent constipation
- Primarily examined in other medical centre, with ultrasound findings of periappendicular infiltration

# Our findings

- On CT scans: 31x25mm appendical mucocoele, suspected perforation, no signs of appendical inflammation
- Free intraperitoneal fluid under cecum and in the sac of inguinal hernia
- C-reactive protein: <1, WBC: 14.7
- Normal levels of Tumor-markers

# CT scans





- The patient was indicated for hospital admission, but refused hospitalization due to personal affairs
- (Re-)admitted the next day, and indicated for classic appendectomy + inguinal hernioplasty
- Surgery realised on 4th day of hospitalization

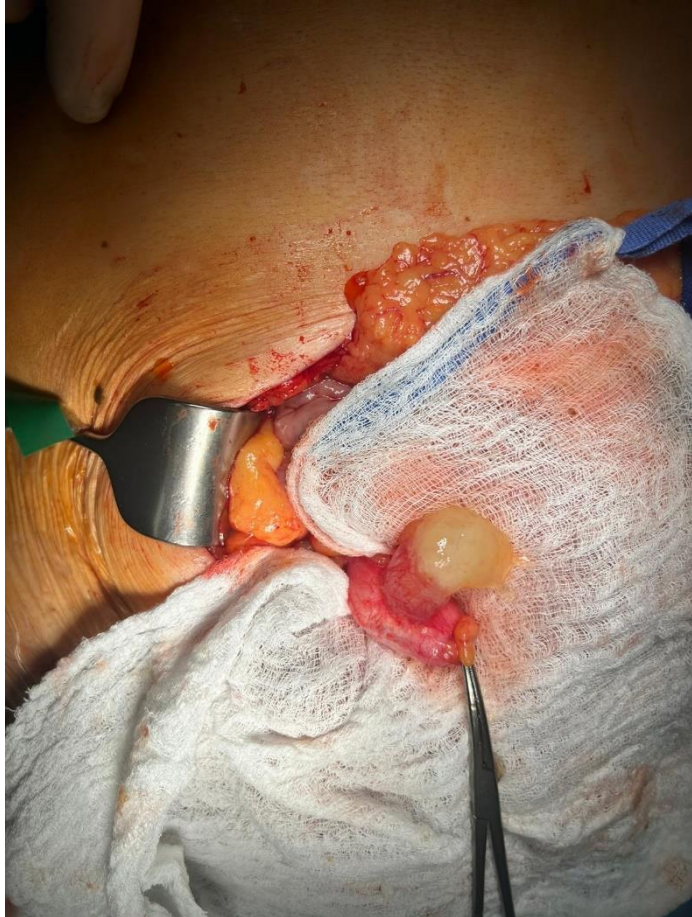
# Peroperation findings

- Preoperative confirmation of spontaneous perforation of mucocoele
- Findings of mucin masses in right hypogastrium, in pelvis and in the sac of the right indirect inguinal hernia

# Surgery

- Classic appendectomy was performed, combined with hernioraphy, in this case the sac was resected *in toto* with mucin content. Massive lavage of peritoneal cavity with iodine saline at the end of the operation

# Surgery



# Post-op recovery

- Without any surgical post-op complications
- Discharged from hospital on 6th day post-op

# Histology findings

- Low-grade mucinous neoplasm of appendix (LAMN), no invasive carcinoma
- POSITIVE RESECTION MARGINS

# Oncology statement – multidisciplinary commission

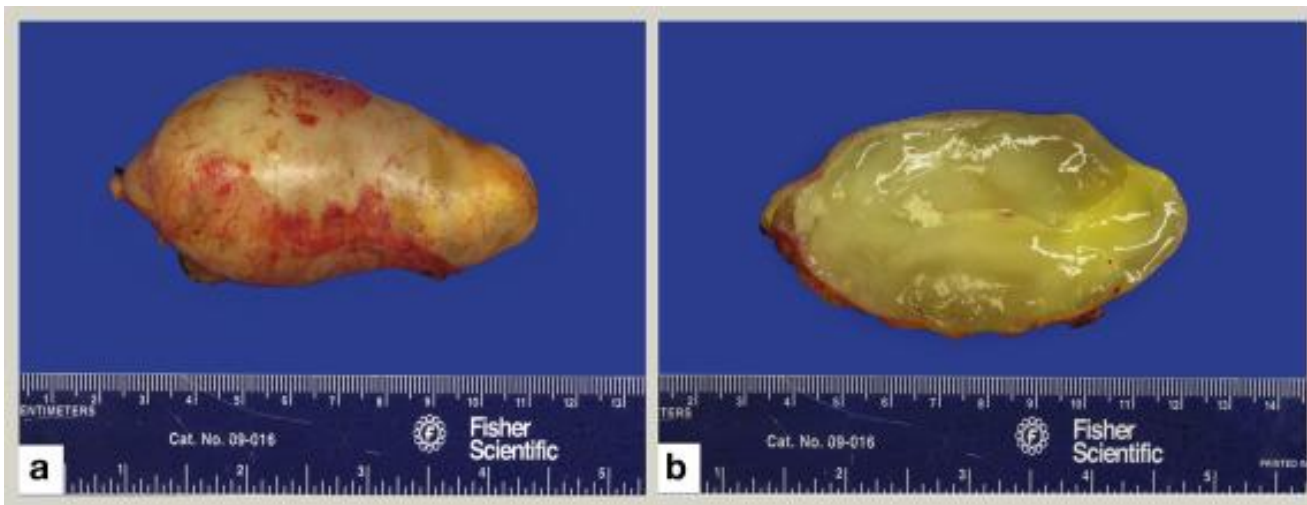
- HIPEC for further consideration
- If so, then resection of the cecum basis is indicated, due to positive resection margins

# Discussion – Appendiceal mucinous neoplasm

- Low-grade appendiceal mucinous neoplasm (LAMN)
- High-grade appendiceal mucinous neoplasm (HAMN)
- Mucinous appendiceal adenocarcinoma (MACA)

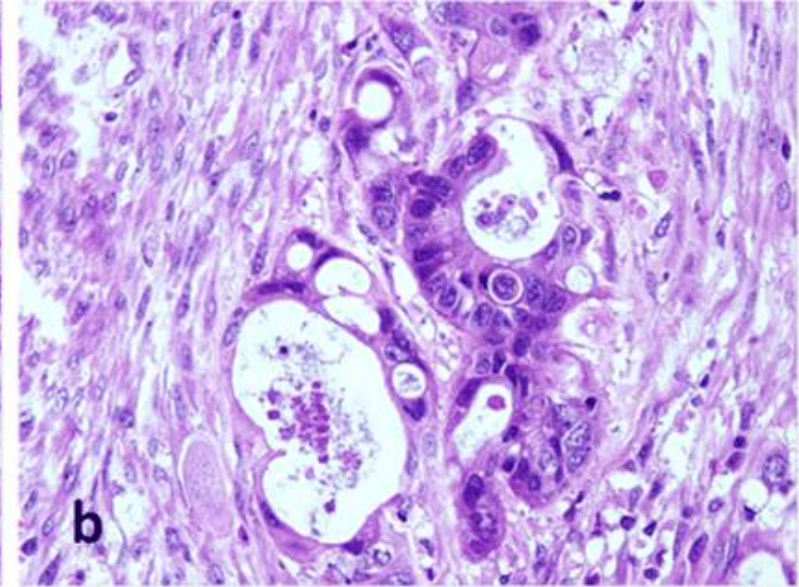
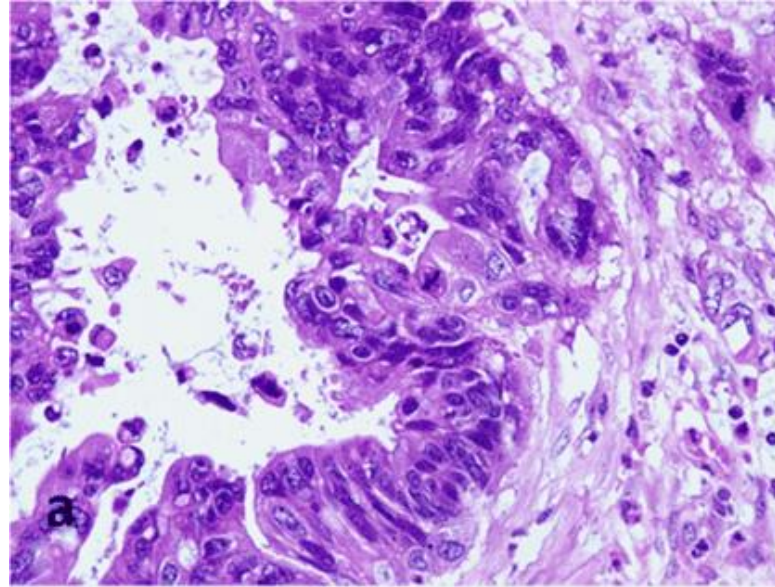
# LAMN

- Simple appendectomy is sufficient
- Careful manipulation during surgery
- Prevention of iatrogenic perforation



# HAMN

1. Appendectomy
2. If positive resection margins – resection of cecal basis
3. If positive Lymph nodes (mesoappendix) – Right hemicolectomy



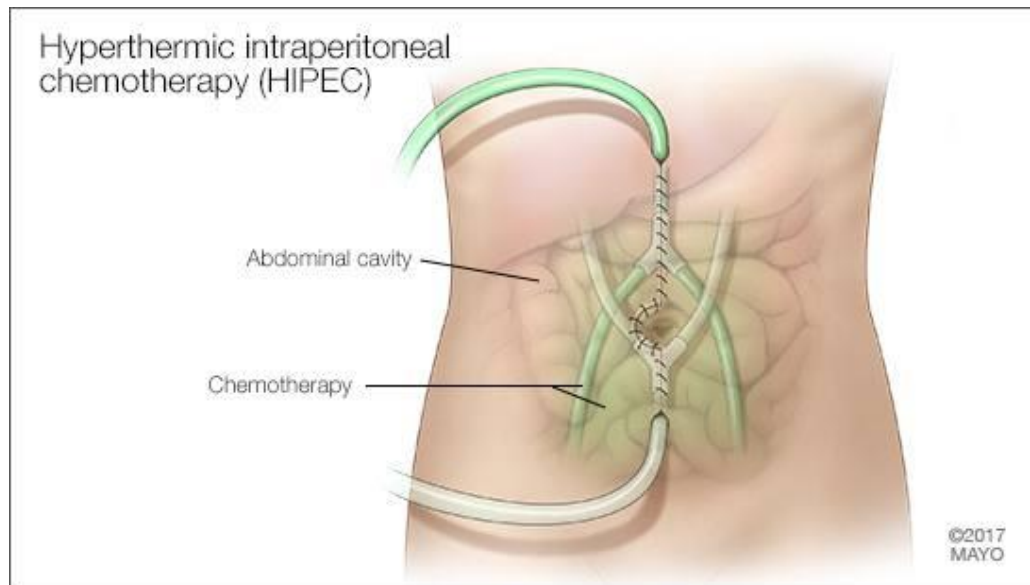
# MACA / Perforation

- MACA – right hemicolectomy
- Perforation – HIPEC (Hyperthermic IntraPERitoneal Chemotherapy)
- Peritoneal dissemination (ergo Pseudomyxoma peritonei) - -
  - Cytoreductive surgery (CRS) + HIPEC



# In our case

- LAMN – simple appendectomy is sufficient
- **BUT! Perforation** – HIPEC in case of LAMN



# Thank you for your attention

