CLINICAL IMAGE IN GASTROENTEROLOGY

Epiploic appendagitis in an 80-year-old woman, an uncommon cause of acute abdominal pain in the elderly

Apendicitis epiploica en una mujer de 80 años, una causa poco frecuente de abdomen agudo en el anciano

A. González-García a,*, M. Escribano-Pérez b, S. Diz Fariña a

a Internal Medicine Service, Hospital Universitario Ramón y Cajal, Madrid, Spain
b Radiodiagnosis Service, Hospital Universitario Puerta de Hierro, Madrid, Spain

An 80-year-old woman with a past history of high blood pressure, diabetes mellitus, and overweight was admitted for symptoms of respiratory infection accompanied by partial respiratory failure. Seventy-two hours after her admission, her initial clinical symptoms were stabilized and the patient complained of nonspecific abdominal discomfort accompanied by nausea and general malaise. Physical examination revealed abdominal rigidity in the right lower quadrant; a computed tomography scan was ordered and it identified epiploic appendagitis (fig. 1A), together with important trabeculation of the locoregional fat (fig. 1B). The patient was put in a fasting state, hydrated intravenously, and given analgesics. Her clinical symptoms improved over the following 3 days and there was no need for surgery.

* Please cite this article as: González-García A, Escribano-Pérez M, Diz Fariña S. Apendicitis epiploica en una mujer de 80 años, una causa poco frecuente de abdomen agudo en el anciano. Revista de Gastroenterología de México. 2015;80:276-277

* Corresponding author. Servicio de Medicina Interna, Hospital Universitario Ramón y Cajal, Carretera Colmenar Viejo, km 9,400, 28034 Madrid, España. Tel.: +34913368402; fax: +34913368400.
E-mail address: andres_gonzalez_garcia@hotmail.com (A. González-García).

2255-534X/© 2015 Asociación Mexicana de Gastroenterología. Published by Masson Doyma México S.A. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).
Figure 1  A) A 2 x 3 mm oval-shaped image is seen at the greater omentum, near the left flank, surrounded by inflammatory changes and a small quantity of free fluid, consistent with epiploic appendagitis as a first possibility. B) A 3 x 3 mm image, immediately adjacent to the previous image, consistent with circumscribed inflammatory changes in the epiploic fat of the left flank with a small quantity of free fluid.

Ethical responsibilities

Protection of persons and animals. The authors declare that no experiments were performed on humans or animals for this study.

Data confidentiality. The authors declare that no patient data appear in this article.

Right to privacy and informed consent. The authors declare that no patient data appear in this article.

Financial disclosure

No financial support was received in relation to this study/article.

Conflict of interest

The authors declare that there is no conflict of interest.

Acknowledgements

The authors wish to thank Dr. José Perales.