

## **Idiopathic Perforated Appendicitis in Neonates and Infants**

Saeed Alhindi, MD, CABS, FRCSI\* Barrak Ayoub, MBChB, FRICMS\*\*

**Background:** Neonatal appendicitis is a very rare condition and has a high mortality rate in premature babies. The diagnosis of acute appendicitis is mainly clinical and the accuracy of clinical diagnosis approach 90%. Although acute appendicitis is a common diagnosis in the pediatric population, it is rare in neonates and infants.

**Objective:** To present the clinical picture of three cases of acute appendicitis in neonate and infants.

**Design:** A Retrospective Study.

**Setting:** Pediatric Surgical Unit, Salmaniya Medical Complex, Bahrain.

**Method:** Two neonates and one infant with acute perforated appendicitis were managed in our unit. The first was ten days old; the second was one month of age and the third was five months of age. The clinical presentations were different.

**Result:** The first case was a female term baby, a product of Caesarean section. On the ninth postnatal day, the patient developed abdominal distention. Abdominal plain X-ray showed a pneumoperitoneum, but no pneumatosis or bowel thickening. During laparotomy, the appendix was noted to have perforated at the base. Appendicectomy was performed and the patient was treated with intravenous antibiotic and supportive measures postoperatively.

The second case was a 5-month-old male term baby. The patient had abdominal distension. A plain abdominal X-ray revealed dilated bowel loops. Laparotomy revealed a perforated appendix. Appendicectomy was performed and patient was treated with intravenous antibiotic for one week postoperatively.

The third case was a 29-day-old male term baby presented with abdominal distension, constipation and bile stained vomiting. Plain abdominal radiograph revealed dilated bowel loops with absent air in the rectum. Laparotomy revealed a perforated appendix with segmental ileal loop volvulus. Appendicectomy and ileostomy were performed.

**Conclusion:** Vascular insufficiency secondary to cardiac defect or perinatal hypoxia was the most likely cause in our first and third cases. The second case could possibly may have been idiopathic.

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\* Assistant Professor, Senior Consultant Pediatric Surgeon

\*\* Chief Resident

Department of Pediatrics  
Salmaniya Medical Complex  
P.O. Box 12, Manama  
Kingdom of Bahrain  
E-mail: sjalhindi@gmail.com