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CASE REPORT

Appendiceal Hyperplastic Polyp: Case Report

Apandikste Hiperplastik Polip: Olgu Sunumu

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ABSTRACT

Appendiceal hyperplastic polyps are morphologically analogous to those seen in the colorectum, but are very rare. In this case report, a 62-year-old woman with a 72-hour history of severe abdominal pain, nausea, vomiting, and anorexia presented to our clinic. On physical examination she was tender to palpation and there was direct rebound tenderness and involuntary guarding in the right lower quadrant. The patient was taken for emergency surgery with a diagnosis of acute abdomen. Appendectomy was performed after exploration findings revealed acute appendicitis. Pathological examination reported hyperplastic polyp of the appendix. A total colonoscopic examination was performed due to the association between appendiceal hyperplastic polyps and adenocarcinoma of the large bowel.

Keywords: Appendicitis, serrated polyps, appendiceal hiperplastic polyps

ÖZ

Apandiks yerleşimli hiperplastik polipler kolorektal olanlara morfolojik açıdan benzerler, ancak nadir olarak görülmektedir. Bu olgu sunumunda 3 gündür olan karın ağrısı, bulantı, kusma, iştahsızlık şikayetleri ile merkezimize başvuran 62 yaşındaki kadın hastaya, fizik muayenesinde batında hassasiyet, sağ alt kadranda, rebound ve defans bulguları olması nedeniyle akut batın tanısıyla acil cerrahi uygulandı; yapılan eksplorasyonda akut apandisit hali saptandı ve apendektomi uygulandı. Patolojik inceleme sonucunda apandikste hiperplastik polip olduğu saptandı. Apandiksteki hiperplastik poliplerin kalın barsaktaki adenokarsinomlarla birliktelikleri açısından hastaya tüm kolonoskopik inceleme yapıldı.

Anahtar Kelimeler: Apandisit, serrated polip, apandiks hiperplastik polip

Introduction

Serrated adenomas of the appendix are considered more aggressive than serrated adenomas of the colon and rectum.[1,2] Serrated polyps are classified histologically into 3 subgroups: Hyperplastic polyps, sessile serrated adenomas, and traditional serrated adenomas.[1,2] Hyperplastic polyps of the appendix are rare and morphologically resemble those of the colon.[3] Hyperplastic polyps of the appendix are rare.[1,2,3] Pathological evaluation of this case was reported as acute appendicitis consistent with hyperplastic polyps (Figure 1, 2). While appendiceal hyperplastic polyps may occur with acute appendicitis, they are often detected incidentally.[3] The possibility of copresentation with adenocarcinomas of the large intestine and findings of mucosal hyperplasia in appendectomy necessitate advanced testing to exclude colorectal neoplasias.[3]

Case Report

A 62-year-old female patient presented to the emergency department with complaints of abdominal pain and vomiting starting 3 days earlier. On physical examination, her vital signs were stable, there was bilateral lower quadrant abdominal sensitivity and right lower quadrant rebound and defense, and signs of acute abdomen were detected. Preoperative abdominal ultrasound showed the appendix had a diameter of 8 mm, thick and echogenic walls, and was minimally compressible. Thinning and perforation of the wall was noted in the distal end. The surrounding adipose tissue appeared hyperechoic with dirty shadowing and there was minimal moderately anechoic free fluid in the right pericecal area and pelvis. The findings were reported as consistent with perforated acute appendicitis, and the patient was taken for surgery. Intraoperative exploratory

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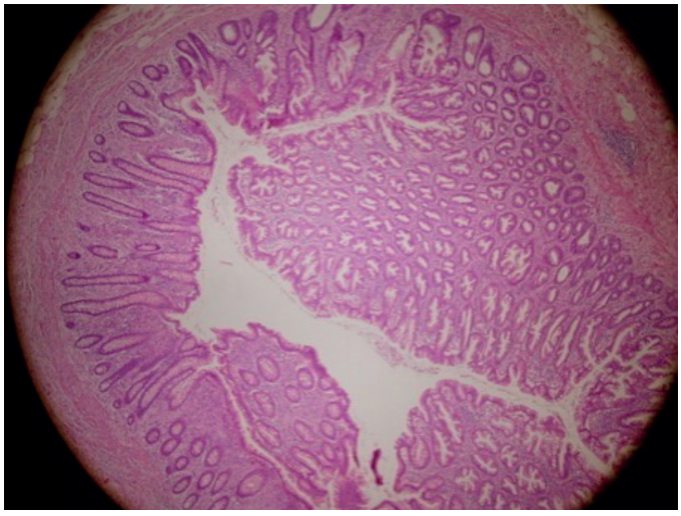

Figure 1. Hyperplastic epithelium lines the internal surface and glands of the appendix, and a polyp formed of cystic enlarged glands is observed (hematoxylin and eosin 40^{x})

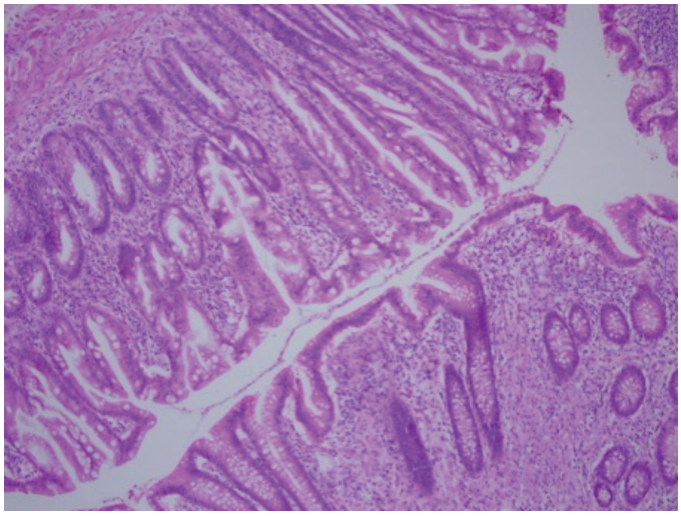

Figure 2. Hyperplastic epithelium lines the internal surface and glands of the appendix, and a polyp formed of cystic enlarged glands is observed (hematoxylin and eosin 100^{x})

findings were also consistent with acute appendicitis and appendectomy was performed. The patient was stable in postoperative follow-up, no problems were encountered upon initiating oral intake, and the patient was discharged on postoperative day 2. On macroscopic examination of the surgical specimen, appendectomy material 4 cm in length with a diameter of 0.6-0.9 cm with some periappendiceal, necrotic-looking adipose tissue appeared obliterated and the lumen was occluded with fecaloid content; appearance on histopathologic examination was reported as compatible with acute appendicitis and hyperplastic polyps (Figure 1, 2). Colonoscopic examination was performed at postoperative 1 month in order to exclude the possibility of synchronous adenocarcinoma of the colon; no polyps were detected.

Discussion

Although hyperplastic polyps of the appendix are often encountered incidentally, they may also present with acute appendicitis, as in our case.

Appendectomy specimens should be investigated histopathologically due to the strong association between appendiceal hyperplastic polyps and adenocarcinomas of the large intestine. Appendiceal malignancies are very rare. Primary appendiceal carcinoma is diagnosed in 0.5-1.4% of appendectomy specimens. There is very rarely preoperative suspicion of these tumors. Appendiceal cancers are most commonly carcinoid tumors, which account for 50% of primary lesions of the appendix. Very rarely seen are granular cell tumor, paraganglioma, neuroma, and neurofibroma of the appendix. Malignant lymphoma may involve the appendix, and metastases originating from the gastrointestinal system, breasts, and female genital organs have also been reported. A recent analysis reported incidental histopathologic detection of malignant tumors in appendectomy material at a rate of 0.3%. For this reason, material obtained during appendectomy should definitely be sent for histopathologic examination.[4,5,6]

Patients should be reminded of the importance of bringing their pathology reports to postoperative follow-up examinations and getting information from their doctors about these reports. Although patients with a diagnosis of suspected appendicitis require a specific approach and treatment, the diagnosis of appendiceal hyperplastic polyps is also an indication for further investigation to exclude synchronous polyps and adenocarcinomas of the large intestine.

Ethics

Informed Consent: Consent form was filled out by the patient.

Peer-review: External and internal peer-reviewed.

Authorship Contributions

Surgical and Medical Practices: B.T., İ.A.T., A.K.P., Concept: B.T., İ.A.T., A.K.P., Design: B.T., İ.A.T., A.K.P., Data Collection or Processing: B.T., İ.A.T., Analysis or Interpretation: B.T., İ.A.T., A.K.P., Literature Search: B.T., İ.A.T., Writing: B.T.

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