

Under

***Corresponding author:** Jennifer Joel, Department of Radiology, St Georges, University of London, UK, E-mail: jennifer.joel@gmail.com

Received: 05-Aug-2023, Manuscript No. roa-23-111338; **Editor assigned:** 07-Aug-2023, PreQC No. roa-23-111338 (PQ); **Reviewed:** 21-Aug-2023, QC No. roa-23-111338; **Revised:** 24-Aug-2023, Manuscript No. roa-23-111338 (R); **Published:** 31-Aug-2023, DOI: 10.4172/2167-7964.1000478

Citation: Joel J (2023) Understanding Acute Appendagitis: Symptoms, Causes and Treatment. OMICS J Radiol 12: 478.

Copyright: © 2023 Joel J. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

severe pain and require drainage, either through minimally invasive procedures or surgical intervention.

: In rare instances, the inflamed epiploic appendage can rupture or perforate, leading to the release of its contents into the abdominal cavity. This can result in peritonitis, a serious inflammation of the abdominal lining that requires immediate medical attention [5].

: The symptoms of acute appendagitis can be similar to those of other abdominal conditions, making accurate diagnosis challenging. Misdiagnosis can lead to unnecessary treatments or delays in appropriate care.

Because the symptoms of acute appendagitis can mimic those of other abdominal conditions, it's important to consider a range of possibilities during the diagnostic process. Some conditions that might be confused with acute appendagitis include:

Diverticulitis: Inflammation of the appendix can cause similar symptoms of abdominal pain, nausea, and fever. Distinguishing between the two conditions is essential to provide appropriate treatment [6].

Diverticulosis: Inflammation or infection of small pouches in the colon wall known as diverticula can lead to symptoms resembling acute appendagitis.

Gallbladder Issues: Conditions like cholecystitis (inflammation of the gallbladder) or gallstones can also present with abdominal pain and discomfort [7].

Stomach or Gastrointestinal Infections: Stomach or gastrointestinal infections can cause abdominal pain, vomiting, and fever, which might be confused with acute appendagitis.

Since the exact cause of acute appendagitis is not always clear, specific prevention strategies are limited. However, maintaining a healthy lifestyle that includes a balanced diet, regular exercise, and proper hydration can contribute to overall digestive health and potentially reduce the risk of abdominal issues [8].

The prognosis for acute appendagitis is generally positive. With appropriate treatment, most cases resolve within a few days to a week.

However, the presence of complications such as abscess formation or perforation can lead to longer recovery times and the need for more specialized care [9].

Acute appendagitis, despite its relative obscurity, is a real medical condition that can cause significant discomfort. Its similarity to other abdominal disorders underscores the importance of accurate diagnosis through physical examination, imaging, and medical history evaluation. Timely intervention, appropriate pain management, and in some cases, surgical consultation, can help individuals recover from this condition and prevent complications. As our understanding of acute appendagitis continues to evolve, medical professionals can refine diagnostic and treatment approaches, ultimately improving patient outcomes.

✎

None

None

References

1. Han Q, Nair RT, DiSantis DJ (2016) The hyperattenuating ring sign of acute epiploic appendagitis. *Abdom Radiol (NY)* 41: 1431-1432.
2. Chin J, Oseguera B, Hon K, Lomiguen CM, McBride T (2022) Epiploic Appendagitis Mimicking Acute Appendicitis: An Osteopathic Case Report. *Cureus* 14: e32499.
3. Qudsiya Z, Lerner D (2020) Acute Epiploic Appendagitis: An Overlooked Cause of Acute Abdominal Pain. *Cureus* 12: e10715.
4. Peña S, Wilkin Z (2020) Acute abdominal pain from epiploic appendagitis. *JAAPA* 33: 28-30.
5. Singh AK, Gervais DA, Hahn PF, Sagar P, Mueller PR, et al. (2005) Acute epiploic appendagitis and its mimics. *Radiographics* 25: 1521-1534.
6. Kaji Y, Kashimura J (2017) Acute Epiploic Appendagitis. *Intern Med* 56: 3113-3114.
7. Eberhardt SC, Strickland CD, Epstein KN (2016) Radiology of epiploic appendages: acute appendagitis, post-infarcted appendages, and imaging natural history. *Abdom Radiol (NY)* 41: 1653-1665.
8. Giambelluca D, Dimarco M, Notte MRV, Re GL, Midiri M (2019) The "central dot sign" in acute epiploic appendagitis. *Abdom Radiol (NY)* 44: 1606-1607.
9. Kaakour D, Teckchandani P, Dong H (2021) Acute Epiploic Appendagitis in a COVID-19-Positive Patient With Antiphospholipid Syndrome. *J Clin Med Res* 13: 563-566.