# APPENDICITIS IN THE NEW BORNS

A.K. Sharma A.K. Shukla L.D. Agarwal A. Gupta C.S. Sharma S.C. Sharma

Acute appendicitis is very rare in neonates. The incidence is less than 2% amongst the children treated for acute appendicitis below the age of 2 years(1). We encountered only two cases of neonatal acute appendicitis in our long surgical practice.

# **Case Reports**

Two male neonates were treated for acute appendicitis af the Department of Pediatric Surgery, S.M.S. Medical College and attached S.P.M. Child Health Institute, Jaipur. Both were born of full term normal deliveries and presented at 7 days and 28 days of age, respectively. They had complaints of refusal to feed, excessive cry, bilious vomiting and increasing abdominal

From the Department of Pediatric Surgery, S.M.S. Medical College, and attached Sir P.M. Child Health Institute Jaipur, Rajasthan.

Reprint requests: Dr. A.K. Sharma, D-1, Doctors' Enclave, Gangwal Park, Jaipur, Rajasthan. Received for publication: May 20, 1992; Accepted: August 10, 1992

distension. There was no birth asphyxia or neonatal jaundice. They had normal passage of meconium at the time of birth. Obstetric history was not contributory in either case.

At admission, the patients were dull and listless and had moderate dehydration. Both had distended abdomen with generalized rigidity. There was no palpable mass or abdominal wall edema. In addition, the first patient had obliteration of liver dullness and absent bowel sounds.

Both the patients had polymorphonuclear leucocytosis and mild hyponatremia. Upright abdominal X-rays revealed few air-fluid levels. In addition, the X-ray abdomen of the first patient also revealed free air under both domes of diaphragm.

Both the cases were resuscitated prior to operation by nasogastric suction, IV fluids and combination of broad spectrum antibiotics. On exploration, there was generalized peritonitis with sero-purulent peritoneal fluid. The appendices were severely inflammed with perforation at their tips and gangrenous patches on their distal halves. Rest of the gut and viscera were normal. Appendectomies were performed and a thorough peritoneal toilet was done with povidone iodine solution in saline. The histopathological examination confirmed the diagnosis of acute appendicitis. Normal ganglion cells were seen in both the appendices. Postoperative period was uneventful in both cases.

### Discussion

Acute appendicitis is rare in infants. Until 1952, only 7 cases with acute appendicitis, during the first two weeks of life were

reported(2). Between 1952 and 1963 a further 19 cases were reported, of these only four patients survived(3). In subsequent years only occasional single case reports have been added. We could find only 2 cases of acute appendicitis in the English literature in neonates less than 24 hours of age(2,4).

Appendicitis in the neonate may be due underlying such causes to Hirschsprung's disease, neonatal necrotising enterocolitis and meconium plug syndrome. Hirschsprung's disease should be suspected if the perforated appendix does not appear inflammed(5). Smith(6) described a neonate, 4 days of age, to have recovered from appendiceal perforation after exchange transfussion. It was possible that hyperbilirubinemia due to RH incompatibility was one of the contributing factors in perforation. In our series of two cases there was no underlying cause for appendicitis.

Neonates stand appendicitis poorly due to the thin wall of appendix which perforates easily. A tiny whips of omentum has little ability to seal off the infectious process and the small abdominal cavity with mobile viscera helps in rapid dissemination of infection(7). Only proper perioperative resuscitation and early surgical intervention can result in a favorable outcome.

#### REFERENCES

- Wilkinson RH. Diagnosis of appendicitis in infants. Am J Dis Child 1969, 118: 687-690.
- Synder WH. Appendicitis during the first 24 hours of life: report on 21 cases and review of 447 cases from the literature. Arch Surg 1952, 64: 549-560.
- 3. Hardman RP. Appendicitis in new born. Am J Dis Child, 1963, 105: 99-101.
- 4. Grossfield JL. Acute appendicitis in first 24 hours of life. J Pediatr Surg 1973, 8: 285-293.
- 5. Martin LW. Neonatal perforation of the appendix is associated with Hirschsprung's disease. Ann Surg, 1967, 166: 799-802.
- 6. Smith AL. Perforated appendix implicating Rhesus immunization in a new born infant. Med J Aust 1969, 2: 602-603.
- 7. Firor HU. Perforating appendicitis in premature infant. Surgery 1964, 56: 581-583.

# **NOTES AND NEWS**

## THIRD ANNUAL IAP HARYANA CHAPTER CONFERENCE

The Third Annual IAP Haryana Chapter Conference is to be held on *December 20*, 1992 at Sonepat. Free papers are invited from the members of Haryana Chapter.

For further details please contact:

**Dr. O. P. Paruthi,**Opp. Batra Petrol Pump,
Sonepat.