

Primary Segmental Omental Torsion, mimicking acute appendicitis

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Abstract

The reported incidence rate of primary segmental omental torsion is 0.0016% to 0.37% and when compared with appendicitis, it is a ratio of less than 4 cases per 1000 cases of acute appendicitis. Almost 80% of cases present with right lower abdominal pain and may imitate acute appendicitis.

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Primary omental torsion is very rare disease and in many cases, it may imitates acute appendicitis. The reported incidence rate is 0.0016% to 0.37% and when compared with appendicitis, it is a ratio of less than 4 cases per 1000 cases of acute appendicitis. Primary omental torsion is more frequent in the right part of the omentum compared to left because it is of greater mobility, length and heaviness

Usually, the primary symptom of omental torsion is acute onset of sharp pain non-radiating elsewhere. Notably, these patients do not complain of anorexia, nausea and vomiting. It has been reported that only 0.6% to 4.8% of cases are diagnosed preoperatively [1,2].

A 63 years old man with BMI: 41 Kg/m² presented with acute abdomen. Physical examination revealed McBurney point positive, rebound tenderness and involuntary guarding all over the lower abdomen. Vital signs were blood pressure: 116/56 mmHg, HR:98 (beats/min), Respiratory rate: 19(breaths/min), temperature: 38.2°C. Laboratory results were WBC:10.6 (4.0-11.0), Neutrophils:8.11(2.5-6.0), CRP:74 mg/l (0-9), haemoglobin:11.6 g/dl (13.0-18.0), haematocrit:36.9% (40-54). Diagnostic laparoscopy demonstrated segmental torsion of the omentum and normal appendix. Patient underwent excision of the twisted segment of the omentum [Figure 1]. He recovered uneventfully and discharged on the second postoperative day.

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Figure 1: Surgical specimen of primary segmental omental torsion. Arrow indicates the twisted neck of the segment of the omentum

