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Rif Mass – A Clinical Study

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I. Introduction

Mass in the abdomen by reason of their wide spread implications, has since long exercised the minds of many workers. Mass in the right iliac fossa is not an uncommon entity. Pandora's box-hackneyed phraseology is apt in case of mass in the right iliac fossa. Patient with mass in the right iliac fossa may confront the surgeon, paediatrician obstetrician and gynecologist. Thorough understandings of the anatomy and pathological processes that may occur within the abdomen are essential for an accurate diagnosis and plan of treatment. Some patients will require immediate surgical intervention, whereas others will improve with conservative treatment.

The purpose of the present study is to recognize certain well defined clinical entities, in mass in the right iliac fossa, the relative incidence of various pathologies, as seen in Govt Mohan Kumaramangalam Medical College ,Salem in the overall endeavor to reduce morbidity and in few instances mortality. Relevant literature has been reviewed.

II. Objectives

To study various diseases which can presents as mass in the right iliac fossa.
To study age and sex distribution of various conditions
To study percentage of various diseases presenting as mass in the right iliac fossa.
To study various modes of management.
To analyse the efficiency of current treatment and its prognosis in our setup.
To follow up the studied cases for further management and to detect complications.

III. Methods

This study consists of evaluation of 172 cases of mass in the right iliac fossa admitted in department of general surgery at Govt Mohan Kumaramangalam Medical College Hospital, Salem during the period from June 2016 to May 2018 . This study includes selection of patients with mass in the right iliac fossa on a randomized and prospective basis.

IV. Inclusion Criteria

The patients are selected after they are diagnosed as having intra abdominal mass in the right iliac fossa of various pathologies after careful history taking, thorough general and local examination and appropriate investigations.

V. Exclusion Criteria

Female patients with pathologies related to uterus and its appendages
Mass arising from parietal anterior abdominal wall and bone

VI. Methodology

All clinical findings were recorded in the proforma case sheets .With each patient admitted with mass in the right iliac fossa, cordial interrogation session was held to obtain particulars of the disease.

Detailed history was carefully -elicited to chart out symptomatology. Patient was subjected to methodical physical examination to assess his general condition and to know the basic vital data on admission examination of abdomen was done in a methodical way and local relevant findings were recorded. Rectal examination was done in a cases, while per vaginal examination was also done in female patients. Systemic examination like respiratory system and cardiovascular system were done routinely.

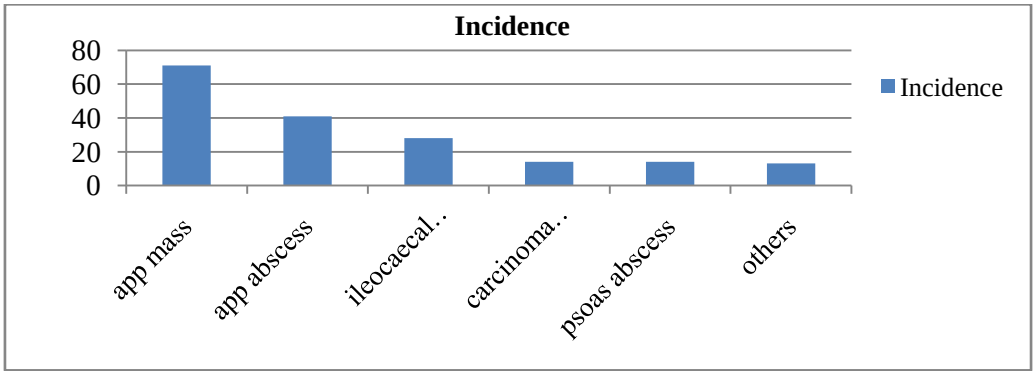
All relevant and routine investigations were done in these cases to establish the diagnosis. Ethical clearance has been obtained for the same. Patients were asked to present themselves for follow-up after a specific interval or at recurrence of symptoms.

Meanwhile all patients received supportive treatment aimed at correction of dehydration anemia, vitamin and other nutritional deficiencies (Anti helmenthics were given whenever indicated.)

Respiratory and other infections were treated with appropriate antibiotics .Bowel preparation was done in all cases requiring exploratory laparotomy. During laparotomy, intra-abdominal examination of all organs was made in addition to specific pathology and specific surgery was done in each case. Postoperative follow-up was meticulously done; intake output charts and vital charts were maintained. They were given antibiotics, analgesics and sedatives if needed.

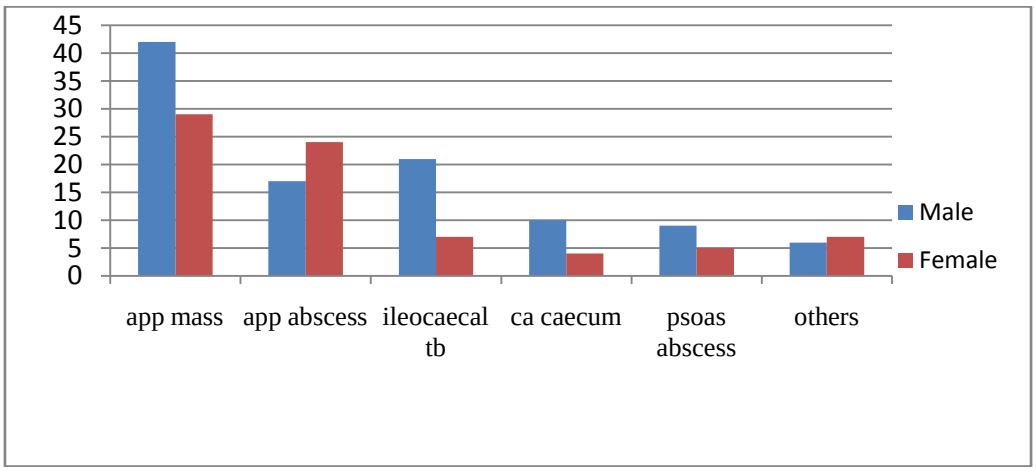
Most of the operated patients had uneventful recovery. Drains were removed after 48 hours and sutures were removed on the 7th post-operative day.

VII. Results



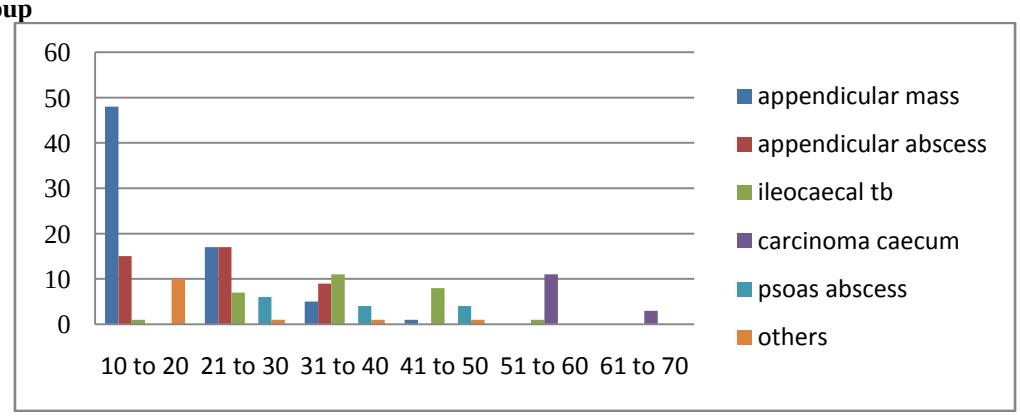
Total number of cases : 181
Among the total case appendicular mass has the highest incidence-71
Appendicular abscess follows second -41
Incidence of ileocaecal tuberculosis -28
Incidence of carcinoma caecum -14
Incidence of psoas abscess -14
Others -13

Sex incidence

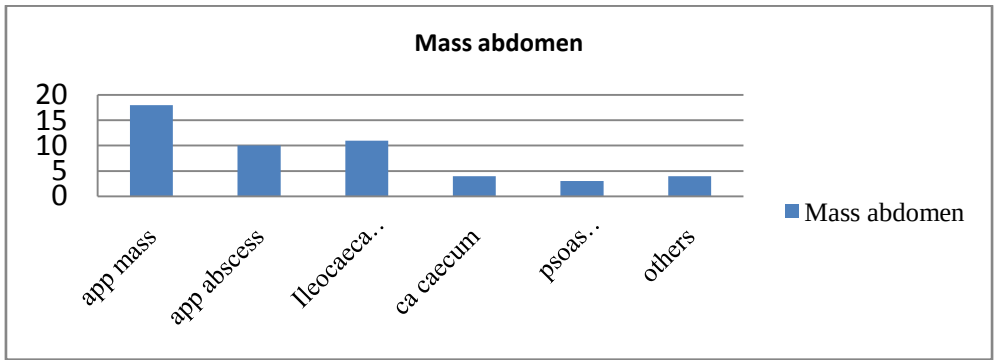


The incidence of Appendicular mass,ileocaecal Tb,carcinoma caecum,psoas abscess are more in males than females,whereas incidence of appendicular abscess is greater in females than males

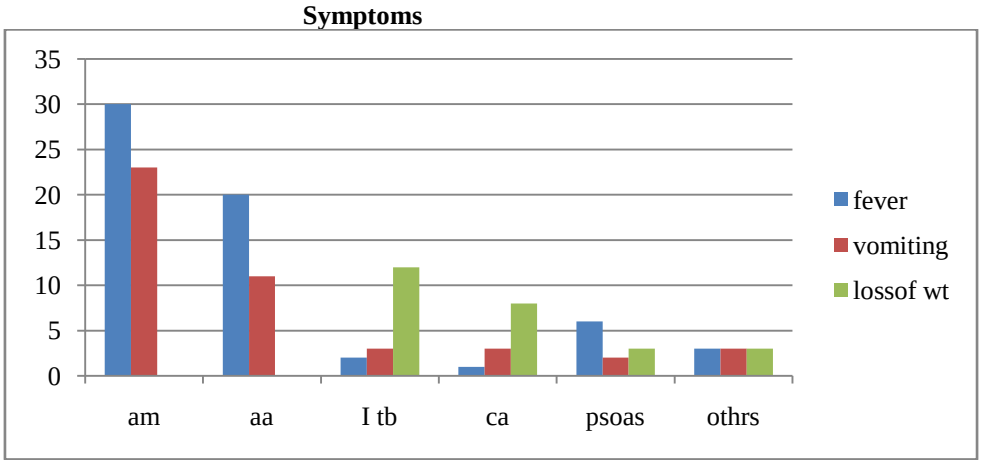
Age group



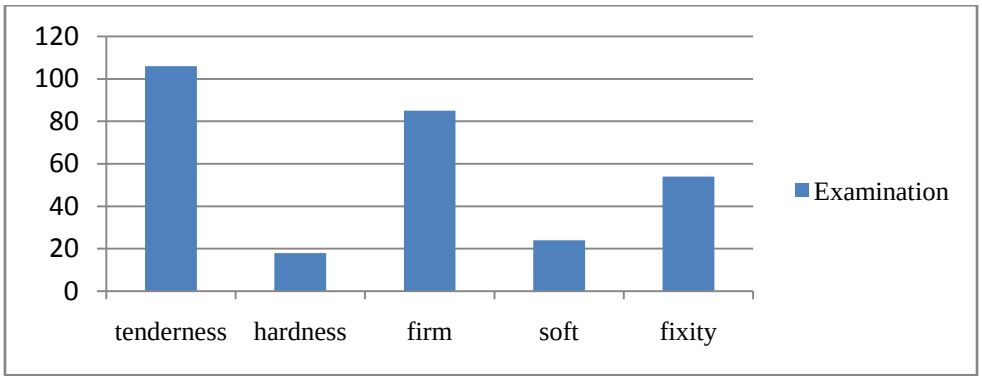
Appendicular pathology is common in the age group 10-30 yrs
Illeocaecal tb,psoas abscess is common among 30-40 years of age.
Carcinoma caecum is common in old age



18 patients of appendicular mass presented with mass abdomen.ileocacal tb was next with 11 patients came with mass abdomen followed by ileocaecal tuberculosis and appendicular abscess.

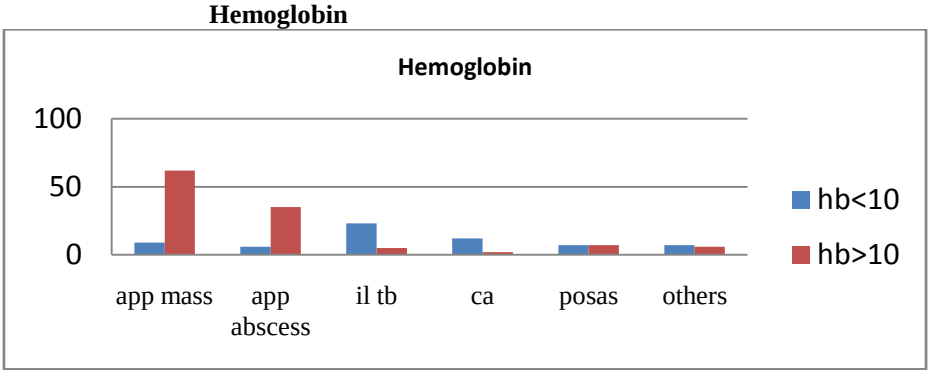


The most common symptom in appendicular mass , abscess and psoas abscess is fever and vomiting .In ileocaecal TB and carcinoma caecum the most common symptom is loss of weight .



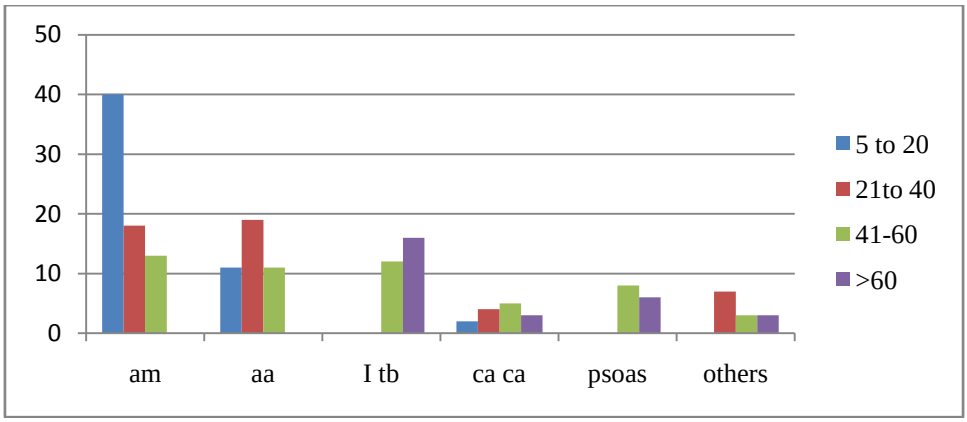
On examination,
106 patients had tenderness, consisted mainly of appendicular mass, abscess ,psoas abscess .The mass is hard in 18 patients mostly were carcinoma caecum cases .Firm was noted in 85 patients while fixity was noted in 52 cases chiefly ca caecum ,ilepocaecal tb ,psoas abscess.

Hemoglobin



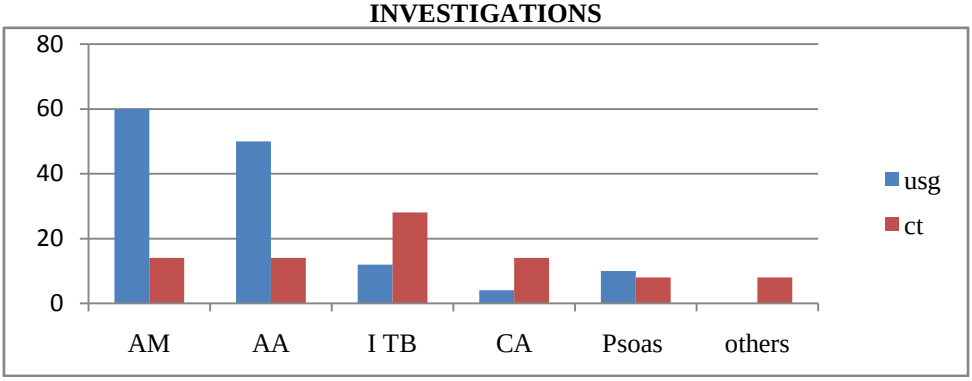
Among 181,117 had hemoglobin above 10.64 cases had hemoglobin less than 10. Anemia is markedly found in ileocaecal TB and carcinoma caecum. Appendicular mass and abscess cases hemoglobin was more than 10.transfusion was needed in carcinoma and ileocaecal tb and psoas abscess ,while rest were given oral iron supplements

ESR

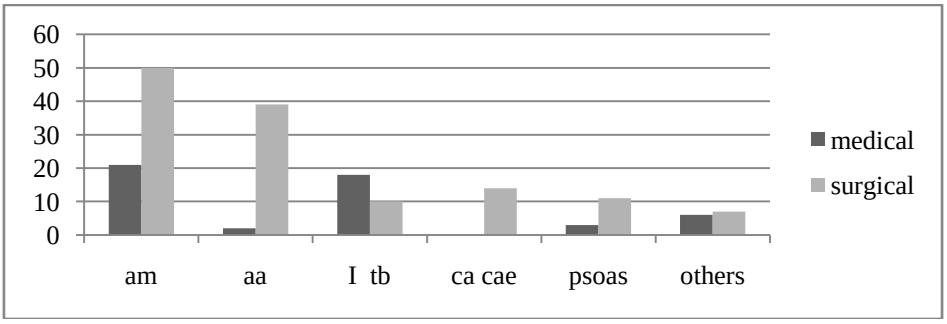


ESR is elevated in ileocaecal TB,carcinoma caecum,psoas abcess.
Among 71 people with appendicular mass only 13 had elevated ESR.
Among 41 people with apppendicular abcess only 11 had elevated ESR.

INVESTIGATIONS

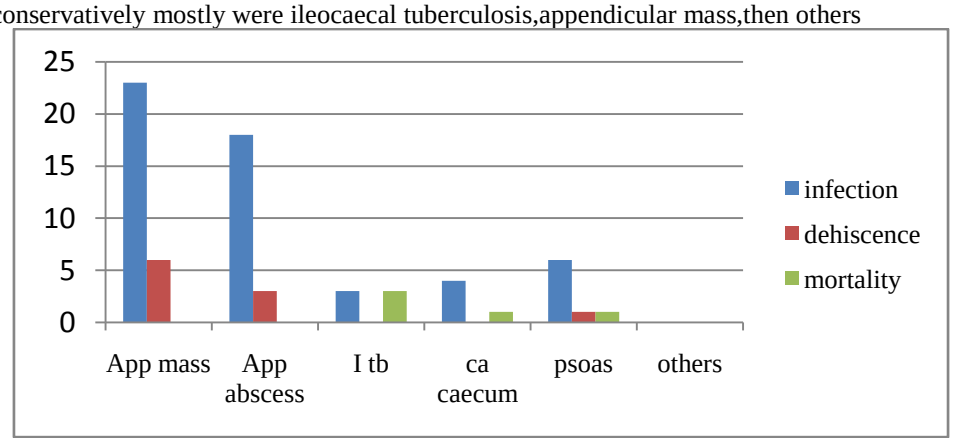


The most common investigation used for diagnosing is usg(123)
CT is used in 86



MANAGEMENT

Appendicular pathology was treated surgically ,so were carcinoma caecum and psoas abscess ,ileocaecal tuberculosis medical management was done .
Among the total number of cases 131 treated surgically
50 treated conservatively mostly were ileocaecal tuberculosis,appendicular mass,then others



The most common complication is infection leading to wound dehiscence in appendicular pathology and psoas abscess .Mortality was highest among ileocaecal tuberculosis and carcinoma caecum followed by psoas abscess .

VIII. Conclusion

Among 181 cases of RIF mass appendicular mass was the highest incidence with 71 cases accounting to 39 % followed by appendicular abscess. Appendicular mass was higher in females when compared to males and highest incidence of appendicular pathology was seen in females among 10-30 years .commonest presenting symptom was pain in the right iliac fossa ,fever and vomiting were also noted .loss of weight was not seen in appendicular pathology .Most of the cases with right iliac fossa mass were managed surgically .Most of the cases recovered well and were followed up regularly .most of the cases were subjected to radiological examination like ultrasound and CT .ultrasound was useful in diagnosis of almost all cases, doubtful cases were diagnosed with CT .prompt intervention causes good recovery and lesser complications and least mortality.

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