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PRIMARY LYMPHOMA OF APPENDIX PRESENTING AS ACUTE APPENDICITIS.

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INTRODUCTION: Primitive gastrointestinal lymphomas are rare and represent only 1–4% of all tumors of the gastrointestinal tract. Gastrointestinal tract is the most common location for extranodal lymphomas. The most affected organs are the stomach and the small intestine. The primary lymphoma of the appendix is extremely rare. The incidence is 0.015% of all gastrointestinal lymphomas.

DISCUSSION: The clinical onset of the disease is often constituted by a surgical complication that requires urgent intervention. The neoplasms of appendix usually manifest clinically with sign and symptoms of acute appendicitis from luminal obstruction (30–50%). Other important clinical manifestations may be an asymptomatic palpable mass, incidental imaging findings, intussusception, gastrointestinal bleeding and ureteral obstruction or hematuria and increasing abdominal girth from rupture of a malignant mucocele, resulting in pseudomyxoma peritonei. The surgical approach and obviate additional surgery may change with detection of these neoplasms at preoperative imaging. A peculiar diagnostic element for lymphoma is diffuse enlargement of the appendix from lymphomatous infiltration on both ultrasound and CT. Specificity for lymphoma will be increased in the setting of abdominal lymphadenopathy or aneurysmal dilatation of the appendiceal lumen. PET/CT is important for staging lymphoma. PET/CT has greater sensitivity, compared to CT alone, in identifying lymph node, extranodal sites and bone marrow involvement by lymphoma. PET/CT can indicate the metabolic response to therapy, earlier detection of disease recurrence and also the overall level of metabolic activity of lymphoma, which correlates with level of aggressiveness and represent a prognostic predictor. There are no clear guidelines for therapy. In the literature primary surgical resection followed by post-operative CHOP (cyclophosphamide, hydroxydoxorubicin, vincristine, prednisolone) chemotherapy showed high efficacy in patients with localized intestinal diffuse large B cell lymphoma.

CONCLUSION: Lymphoma of the appendix is rare. Usually manifest clinically with sign and symptoms of acute appendicitis. The detection of this neoplasm at preoperative imaging is very difficult although a characteristic CT scan appearance may lead to preoperative diagnosis. PET/CT is important for staging lymphoma. The histopathological examination of all appendectomy is essential and should be mandatory. In the literature, the combination of surgery and chemotherapy is the best treatment for appendiceal lymphomas.