

Purpose

To assess the accuracy of MDCT in diagnosis and preoperative evaluation of alternatives of acute appendicitis causing RLQP and associated complications.

Material and methods

- Since March 2015 until November 2017, 250 consecutive patients (148 females and 102 males) with ARLQP underwent MDCT examinations with contrast. Each scan was evaluated independently for the presence of inflammatory process (appendicitis), associated complications and for the detection of other findings rather than acute appendicitis causing RLQP. The radiological findings were compared with histopathological results for operated cases.

Results

- 116 typical cases out of 250 patients received CT diagnosis of acute appendicitis, 49 with complications such as retrocecal appendix (7), retroileal appendix (5), appendicolith (6), mucocoele (3), and appendicular abscess (28); 85 patients received alternative diagnosis; patients who were operated upon based on either clinical diagnosis or US findings or both, with negative CT findings and pregnant women were excluded from the study.

Conclusion

- Using MDCT in the preoperative evaluation of appendicitis, provides high accuracy for detecting complications, detects other findings causing RLQP, and better guides physicians for proper management of these patients.