Examination triggered appendicitis: is it a new generation entity?

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Dear Sir,

Twenty-six students underwent appendicectomy for acute right iliac fossa pain in the age group of 13–20 years, in the month of Feb. to May 2008, just before appearing for final school examination. Out of 18 females and 8 males, ultrasound abdomen diagnosed acute appendicitis in 20 cases and 6 had recurrent appendicitis. We were cautious while deciding to operate in such children as we had to rule out functional examination phobia and surgery would prevent them from appearing for exam and may lead to loss of an academic year. So all such patients were subjected to serial ultrasound scan and got a second opinion from other surgeons, before deciding final surgical intervention. Laparoscopic appendicectomy was performed in 22 cases and 4 had open procedure. Histological confirmation was present in 21 cases and 5 had reactive lymphoid hyperplasia.

Examination is always a life stress which brings out various threat and uncertainty, predisposing an attack of appendicitis. Stress and depression are always claimed as an etiological factor for appendicitis based on various anecdotal reports [1], there is no real conclusive evidence. King Edward VII developed appendicitis on the eve of coronation. Harding, noted pathologist commented in 1962 that psychological factors were responsible for high incidence

of removal of normal appendices among young females – “leaving the smoother life of school to start work, having a job which is not liked, quarreling with a boyfriend and other emotional upsets are commoner at this age than other” [2]. However, there has been a report of association of clinically significant hemorrhagic stress ulceration in a case of appendicitis in a pediatric patient [3].

Even though white blood cell count, serum C-reactive protein level, interleukin – 6 estimation or a decrease in plasma total anti oxidant capacity may depict the gravity of progression of disease process in acute appendicitis [4], majority of these investigation are unavailable in smaller places and the diagnosis rests solely on clinical suspicion, radiological investigation and diagnostic laparoscopy.

It is time for all of us to determine if during examination time, any personality disorder or excessive stress of new competitive generation increases the incidence of acute appendicitis, in the school going children.

References

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