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66 Multicentre Study on Management of Right Iliac Fossa Pain in Young Females: A Need for Recommendation

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Introduction: Right iliac fossa (RIF) pain in young women remains a diagnostic challenge. It is one of the commonest surgical emergency presentations, however a sub-group of patients have no definitive diagnosis. Current tools used includes observations, routine investigations, ultrasound, and laparoscopy. Specific recommendations for a better management of this cohort are required.

Method: Retrospective multi-centre (two different cultural backgrounds) analysis of females aged 17 to 35 acutely admitted with RIF pain over a five-month period was conducted. The length of stay, current tools used for investigation (including laparoscopy) and cost were calculated. Pregnant women and those with a definitive picture of appendicitis were excluded.

Results: A total of 154 patients with RIF pain were studied. 77 (50%) were sent home within 24 hours. Of the remaining 77 patients, 21 laparoscopies were performed, 10 had positive findings (47.6%), 9 appendicitis and 1 carcinoid tumour. Only two CT scans were performed, both indicated positive cases that required surgery. Patients without a definitive diagnosis had an average hospital stay of 4 days compared to 2 when successfully managed conservatively. Cost calculated for negative laparoscopy was £2915 and £469 for CT scan combined with one-day stay.

Conclusion: This study demonstrated that a sub-group of young females with RIF pain would benefit from early CT scan, to definitively diagnose or rule out appendicitis. This would be more cost effective and help to avoid un-necessary invasive procedure and prolonged hospital stays. Guidelines are needed for more timely diagnosis and optimization of management in this cohort.