

Activitatea Editorială IMU (2014)

- **Monografii, Ghiduri Naționale și practice** **1**
- **Articole în reviste de circulație internațională** **32**
- **Articole în reviste naționale recenzate** **27**
- **Teze la Congrese Internaționale** **61**
- **Total** **121**

Activitatea Editorială a IMSP IMU a. 2014



Gheorghe Ciobanu Resuscitarea Cardiorespiratorie și Cerebrală în 2 volume

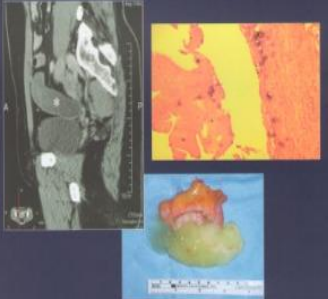
Articole în reviste de peste hotare recenzate (2014)

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Preoperatively Diagnosed Mucocele of the Appendix

Gh. Rojnovanu¹, Gh. Ghidirim¹, I. Mishin¹, M. Vozian¹, A. Mishina²

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(2012): 0,777

Image Quiz for Surgeons

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¹First Department of Surgery "Nicolae Anestiadi" & Laboratory of Hepato-Pancreato-Biliary Surgery
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²Institute of Mother and Child Health Care, Kishinev, Moldova

Resumen

Diagnóstico preoperatorio de un quiste mucocel del apéndice

Mucocele del apéndice es un diagnóstico raro, caracterizado por dilatación lumenal del apéndice debido a acumulación de moco en su interior. Este artículo describe un caso de mucocele del apéndice diagnosticado preoperatorio. La paciente era una mujer de 37 años con un diagnóstico preoperatorio de mucocele del apéndice. Durante la cirugía se encontró un apéndice dilatado y repleto de moco. El diagnóstico preoperatorio se basó en los hallazgos de la tomografía computarizada y la ecografía. El apéndice tenía un diámetro de 3,5 cm y una longitud de 8,5 cm. El diagnóstico preoperatorio se basó en los hallazgos de la tomografía computarizada y la ecografía.

Cuvinte cheie: mucocele, apéndice vermiforme, diagnóstico preoperatorio.

Abstract

Mucocele of the appendix is a frequent entity characterized by dilatation of the lumen due to accumulation of mucoid substance and is rarely diagnosed preoperatively. In our case, we report a 37-year-old female patient who was referred

for a cystic mass in the right lower quadrant. The patient was found to have a dilated vermiform appendix during laparotomy. The preoperative diagnosis was based on the findings of computed tomography and ultrasonography.

Key words: mucocele, vermiform appendix, preoperative diagnosis.

after a cystic mass was found incidentally during a routine ultrasonography examination performed according to a preoperative indication. Patient's past medical history was unremarkable. At admission she presented no complaints, physical examination didn't reveal any pathological changes. All the routine tests were within normal range. CEA concentration was 20.9 ng/ml (normal range 0.3-5.40), CA 125-48.22 u/ml (normal range 2.35-18.7). USG revealed a well-defined cystic lesion with heterogeneous content 7.5 x 3.5 cm with thick walls up to 3.7 mm in the right iliac fossa (Fig. 1). Abdominal CT scan revealed a tubular mass with

homogeneous content (0-50 HU) and mural calcifications 80 x 35 mm extending from the cecum to the right ovary (Fig. 2). A preoperative diagnosis of appendiceal mucocele was established and the patient was scheduled for surgery. A significantly enlarged vermiform appendix, 8.5 x 4.0 cm, with mucous base was found on laparotomy (Fig. 3). The wall of the appendix was intact, without signs of content leakage. Peritoneal cavity was irrigated thoroughly and no signs of peritoneal dissemination were found. Appendectomy was performed. After surgery gross examination of the resected specimen showed a dilated vermiform appendix containing mucous mass (Fig. 4). Histological examination revealed a simple mucocele with features of calcified crystals in the appendiceal wall (Fig. 5). The postoperative course was unremarkable. At 3 months follow up no signs of peritoneal involvement were found and the levels of CEA and CA 125 were normal.

Introduction

Appendiceal mucocele (AM) is a rare entity with a variety of clinical symptoms or no surgical finding. The incidence is approximately 0.5% and 0.1% of all appendicitis and AM, respectively. AM is a progressive dilatation of the vermiform appendix due to accumulation of the mucus, may be benign or malignant process. This condition is difficult to detect preoperatively. The diagnosis is based on the findings of the preoperative imaging (1, 2). We describe a case who was diagnosed with AM preoperatively.

Case report

A 37-year-old female patient was referred

after a cystic mass was found incidentally during a routine ultrasonography examination performed according to a preoperative indication. Patient's past medical history was unremarkable. At admission she presented no complaints, physical examination didn't reveal any pathological changes. All the routine tests were within normal range. CEA concentration was 20.9 ng/ml (normal range 0.3-5.40), CA 125-48.22 u/ml (normal range 2.35-18.7). USG revealed a well-defined cystic lesion with heterogeneous content 7.5 x 3.5 cm with thick walls up to 3.7 mm in the right iliac fossa (Fig. 1). Abdominal CT scan revealed a tubular mass with

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Discussion

The mucocele of the appendix was first described in 1942 by Reilly and Kelly (3). The term "mucocele of the appendix" includes the histological diagnosis of simple mucocele or mucinoma, mucosal hyperplasia, mucinous adenocarcinoma, and mucinous cystadenocarcinoma, including all cases that were initially diagnosed as pseudomyxoma peritonei (4). Nevertheless, some authors have recently questioned this classification and

terminology due to uncertain behavior and classified appendiceal mucocele mucinoma as either low-grade mucinous neoplasm or mucinous adenocarcinoma based on submucosal and cryptic foci (5).

Referring to gender distribution, there are discrepancies between different reports. Some studies describe female predominance (2, 10), others show a similar incidence in men and women (12, 13) and still others show a higher frequency in men (5). In age distribution, the incidence is predominant in the 5th and 6th decades of life, although

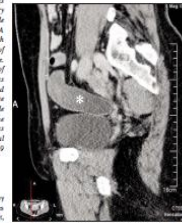


Figure 1. CT showing a cystic mass with hyperechoic content.



Figure 2. Intraoperative view: significantly enlarged vermiform appendix with a mucous base.

Figure 3. USG showing a cystic mass with hyperechoic content.

ARCHIVES



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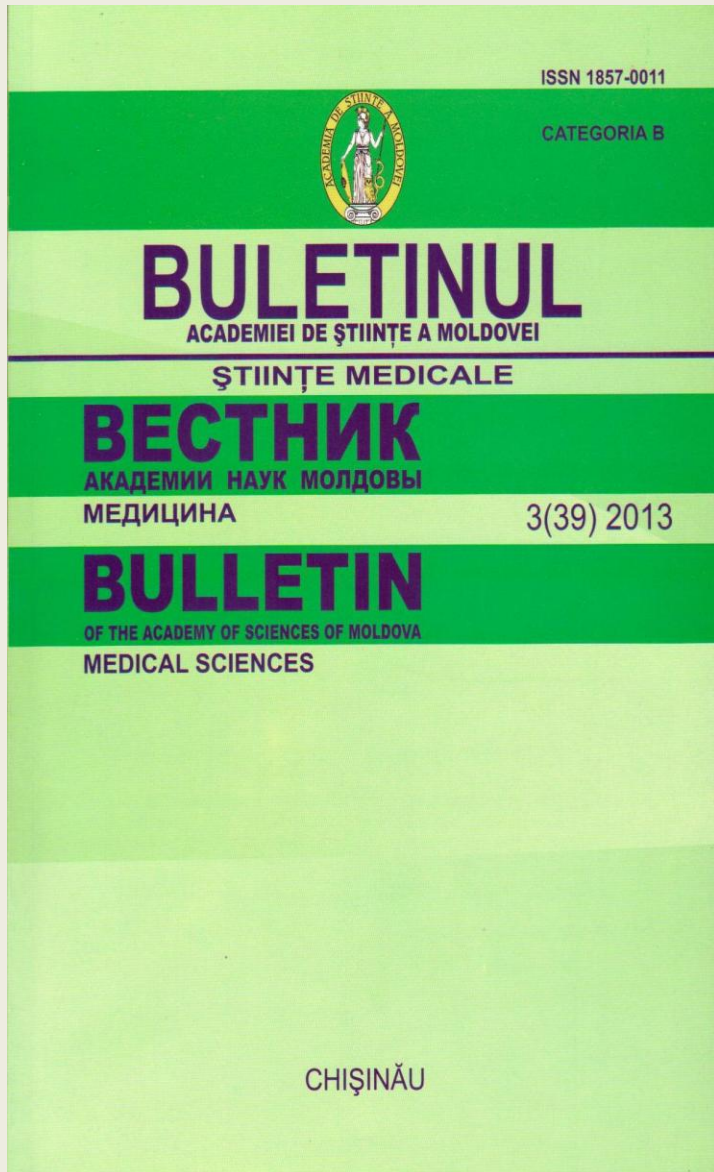
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Articole în reviste de circulație internațională (2014)



În Archives of the Balkan Medical Union a. 2014 vol. 49 nr. 1 supl. sunt publicate 31 articole ale colaboratorilor științifici al instituției.

Indexul citării articolelor publicate (2014)



Stark et al. *BMC Research Notes* 2014, 7:1
<http://www.biomedcentral.com/1756-0500/7/1>

CASE REPORT

Open Access

Preoperative assessment and treatment of appendiceal mucocele complicated by acute torsion: a case report

Christoffer Stark^{1,3*}, Mikko Jousi² and Berndt Enholm¹

International Journal of Surgery Case Reports 5 (2014) 8–11

Contents lists available at ScienceDirect

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An unusual case of primary colonic dedifferentiated liposarcoma[☆]

Mehmet Akif Türkoğlu^{a,*}, Gülsüm Özlem Elpek^b, Volkan Doğru^a, Hasan Çalıŝ^c, Aslı Uçar^b, Cumhur Arıcı^a

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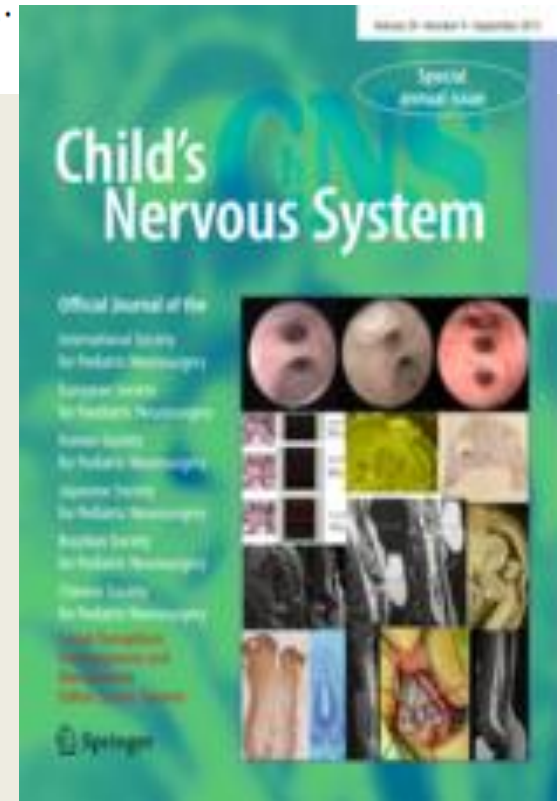
^c Department of General Surgery, Antalya Training and Research Hospital, Antalya, Turkey

Childs Nerv Syst (2014) 30:579–589
DOI 10.1007/s00381-014-2370-2

REVIEW PAPER

Abdominal cerebrospinal fluid pseudocyst: a comparative children and adults

Dabdoub • Mario Chavez •
rrufino • Adan Coimbra •



Indexul citării articolelor publicate (2014)



Curr Hepatology Rep (2014) 13:35–42
DOI 10.1007/s11901-014-0221-y

MANAGEMENT OF THE CIRRHOTIC PATIENT (NS REAU AND A CARDENAS, SECTION EDITORS)

Current Management Strategies for Acute Esophageal Variceal Hemorrhage

Brett Fortune · Guadalupe Garcia-Tsao

REVISTA ESPAÑOLA DE INVESTIGACIONES QUIRÚRGICAS
Spanish Journal Surgical Research

Spam. J. Surg. Res. Vol. XVII Num. 1 Año 2014

Indicador de Impacto de la Revista (IRIQ), Índice de Referencias y Citaciones de la Revista (IRIC) y el Índice de Referencias de la Revista (IRIR) de la Asociación de Cirujanos Españoles (ACE) y la Asociación de Cirujanos Españoles (ACE) y la Asociación de Cirujanos Españoles (ACE)

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Spanish Journal of Surgical Research
Vol XVII n°:1 (35-38) 2014



MUCOCELE APENDICULAR ASOCIADO A CISTOADENOMA SEROSO DE OVARIO Y A TUMOR DE COLON DERECHO.

APPENDICEAL MUCOCELE ASSOCIATED TO OVARIAN SEROUS CYSTADENOMA AND RIGHT COLON TUMOR.

Carvajal Balaguera J, Llanos Egüez K, Fernández Isabel P, Garcia-Almenta M, Carvajal-Hernández CM

Servicio de Cirugía General y Digestiva.
Hospital Central Cruz Roja San José y Santa Adela. Madrid, España.

Indexul citării articolelor publicate (2014)



Amini et al. *Orphanet Journal of Rare Diseases* 2014, 9:71
<http://www.ojrd.com/content/9/1/71>



REVIEW

Open Access

Secreted mucins in pseudomyxoma peritonei: pathophysiological significance and potential therapeutic prospects

Afshin Amini, Samar Masoumi-Moghaddam, Anahid Ehteda and David Lawson Morris*

Surg Today
DOI 10.1007/s00595-014-0866-8

ORIGINAL ARTICLE

Therapeutic experience with primary liposarcoma from the sigmoid mesocolon accompanied with well-differentiated liposarcomas in the pelvis

Zhanlong Shen · Shiyao Wang · Ligong Fu ·
Jingli Shi · Mujun Yin · Yingjiang Ye ·
Shan Wang

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Olgu Sunumu

Apendiks Torsiyonunu Taklit Eden Perfore Akut Apendisit: Olgu Sunumu

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Suruç Devlet Hastanesi, Radyoloji Bölümü, **Haseki Eğitim ve Araştırma Hastanesi, Radyoloji Bölümü, *Özel Halkalı Kent Hastanesi, Genel Cerrahi Bölümü*

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**Ocena częstości występowania patologii
w obrębie górnego odcinka
przewodu pokarmowego u chorych
ze zdekompensowaną marskością wątroby
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Evaluation of prevalence of pathology
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Marek Konrad Kowalski, Aleksandra Cok, Danuła Domżał-Magrowska,
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Indexul citării articolelor publicate (2014)



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An unusual case of primary colonic dedifferentiated liposarcoma[☆]



Mehmet Akif Türkoğlu^{a,*}, Gülsüm Özlem Elpek^b, Volkan Doğru^a, Hasan Çalış^c,
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INTERNAL MEDICINE

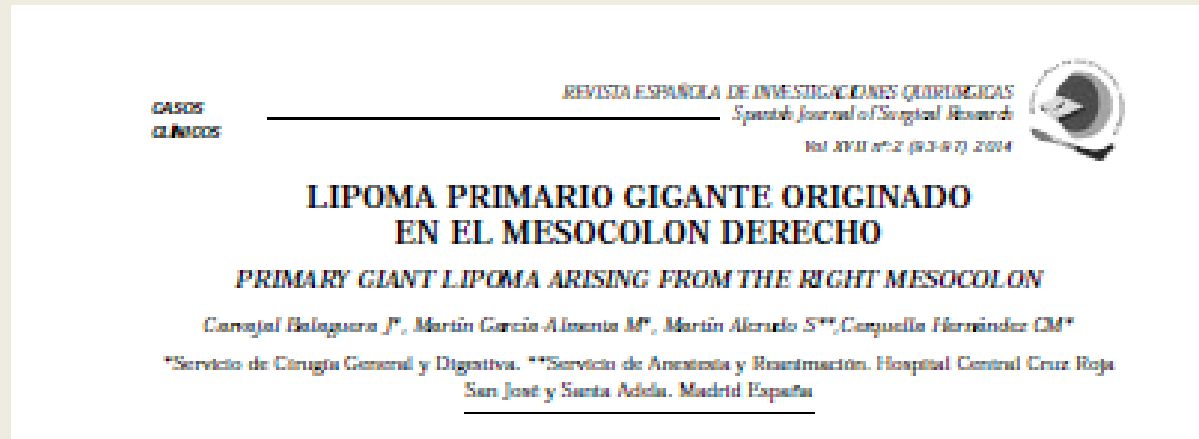
□ CASE REPORT □

Reactive Lymphoid Hyperplasia with a Lipomatous Component Associated with Fecal Compaction in an Appendiceal Orifice

Masaya Iwamuro^{1,2}, Yoshinari Kawai¹, Katsuyoshi Takata³,
Yoshio Miyabe¹, Hiroyuki Okada⁴ and Kazuhide Yamamoto²



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Douleurs thoraciques d'origine viscérale

Chest pain of visceral origin

Jean-Marie Berthelot

Service de rhumatologie, Hôtel-Dieu, CHU de Nantes, 1, place Alexis, 44093, Nantes cedex 01, France

Indexul citării articolelor publicate (2014)



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急性腹症で発症した特発性乳び腹水による腹膜炎の1乳児例

大津 一弘, 亀井 尚美, 上田 祐華

要 旨

症例は生後2か月男児。急性腸炎疑いで入院加療中急激に腹膜炎症状を呈したため緊急開腹術を施行した。開腹時、腹腔内から大量の乳びが噴出し、右後腹膜の破綻を認めたが、乳び腹水の原因となるような器質的病変は認めなかった。そのため腹腔内洗浄と腹腔ドレナージを施行した。術後経過は良好で、術後は成分栄養剤 (EDP)、MCT ミルク等を使用し、再発なく軽快退院した。乳び腹水による腹膜炎の症例報告は稀であるが、急性腹症の鑑別診断として考慮しておくべきである。

索引用語：乳び腹水、腹膜炎、乳児

Publicarea manualelor, ghidurilor:

- **CIOBANU GH.** *Resuscitarea cardiorespiratorie și cerebrală*. Volumul 1. Chișinău, “Nova-Imprim”. 2014: 772 p. ISBN 978-9975-4396-9-5
- **CIOBANU GH.** *Resuscitarea cardiorespiratorie și cerebrală*. Volumul 2. Chișinău, “Nova-Imprim”. 2014: 1094 p. ISBN 978-9975-4396-9-5

Articole din reviste cu factor de impact :

- ROJNOVEANU GH., GHIDIRIM GH., **MISHIN I., VOZIAN M.**, MISHINA A. Preoperatively diagnosed mucocele of the appendix. *Chirurgia (Bucur)*. 2014;109(3):416-419. (ISSN 1221-9118) ISI IF(2012):0.777

Articole din alte reviste editate în străinătate

- CIOBANU GH.**, GROPPA S. Status epilepticus. *Archives of the balkan medical union*. 2014; 49, 1(supl.): 196-200. (ISSN 0041-6940)
- CIOBANU GH.** Hypertensive Crisis. *Archives of the balkan medical union*. 2014; 49, 1(supl.): 196-200. (ISSN 0041-6940)
- GHIDIRIM GH., **MISHIN I.**, ROJNOVEANU GH., **VOZIAN M.**, MISHINA A. Appendiceal mucinous lesions and pseudomyxoma peritonei treatment results. *Archives of the balkan medical union*. 2014; 49, 1(supl.): 12-17. (ISSN 0041-6940)
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- GHIDIRIM N., **MISHIN I.**, ANTOCI L., CERNAT M., CHEMENCEDJI I. Synchronous occurrence of gastric adenocarcinoma with signet-ring cell morphology and gastrointestinal stromal tumor of the stomach. *Archives of the balkan medical union*. 2014; 49, 1(supl.): 95-99. (ISSN 0041-6940)
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- MISHINA A., MADAN D., **MISHIN I.** Ovarian fibrothecoma in adolescent. *Archives of the balkan medical union*. 2014; 49, 1(supl.): 115-118. (ISSN 0041-6940)
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