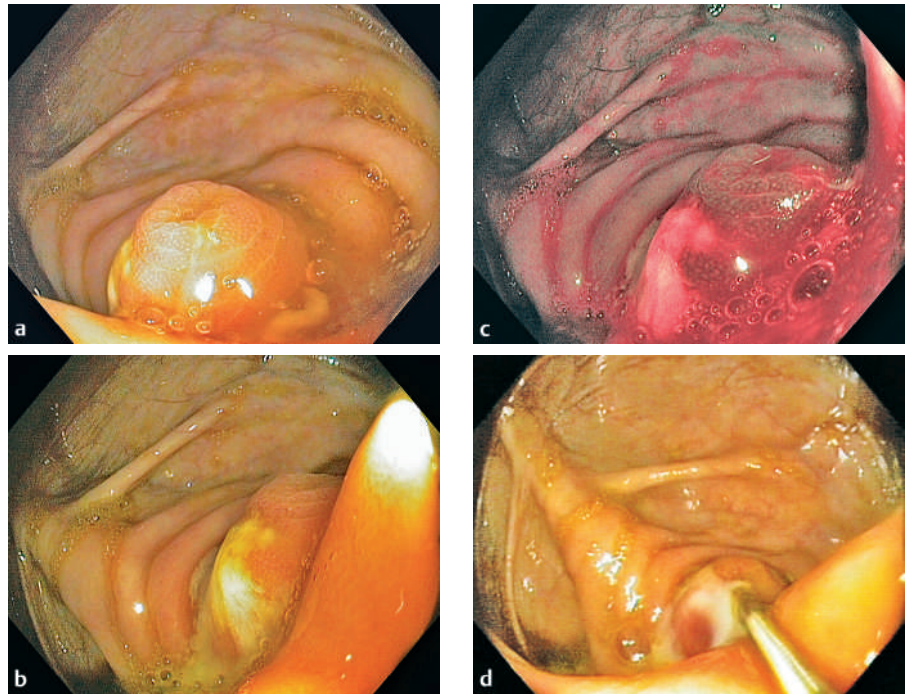


Colonoscopic diagnosis of asymptomatic acute appendicitis is extremely rare. Acute appendicitis has been described as a complication of colonoscopy [1]; however, obstruction of the appendiceal lumen, with various causes, is believed to be the event that leads to the development of acute appendicitis.

We describe here the case of a 65-year-old woman who was referred to our endoscopy suite for colonoscopic evaluation of a right abdominal mass suspicious for colon cancer. She had no history of abdominal pain, fever, chills, night sweats, nausea, vomiting, or constipation. The colonoscopic examination was carried out with an Evis Exera II scope (Olympus CF-Q180A). At colonoscopy, the appendix was found to be bulging into the cecum, with pus flowing from the orifice (Figures 1a–c). Probing with a biopsy forceps resulted in the release of more pus (Figure 1d). The patient underwent surgery, and the diagnosis of acute appendicitis was confirmed.

A case of asymptomatic early acute appendicitis initiated and diagnosed during colonoscopy has been described [2]. The present case is consistent with the view proposed by some authors [3,4] that individuals with acute appendicitis may not have any symptoms if the pus drains into the cecum and they do not develop serositis. So far as we are aware, this is the first report in which acute appendicitis has been diagnosed with high-resolution endoscopy plus narrow-band imaging.

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**Figure 1** a Colonoscopy revealed a mildly erythematous and markedly edematous appendiceal orifice, with the appendix bulging into the cecal lumen and pus draining into the cecum. b, c The pus is flowing intraluminally into the cecum, as seen on high-resolution white-light imaging (b) and the corresponding narrow-band image (c). d Probing with a biopsy forceps resulted in the release of more pus.

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