

Image of the Month

Naren Gupta, MD, PhD; Bruce D. Schirmer, MD; C. Joe Northup, MD

A 47-YEAR-OLD MAN PRESENTED TO THE EMERGENCY department with a 3-day history of right lower quadrant abdominal pain, fever, and loss of appetite. The patient's medical history was significant for a recent unintentional 20-pound weight loss, constipation, night sweats, asthma, and tobacco and alcohol abuse, without any prior episodes of similar abdominal pain. He had an elevated white blood cell count and was tachycardic on examination, with

peritoneal signs in the right lower quadrant. Abdominal computed tomography revealed a contrast-containing 4.4 × 6.6-cm mass in the right lower quadrant with associated inflammatory changes (**Figure 1**). On laparoscopic exploration, mobilization of the cecum and right colon demonstrated a necrotic mass in the ileocecal region (**Figure 2**).

What Is the Diagnosis?

- A. Appendicitis
- B. Cecal cancer
- C. Cecal diverticulitis
- D. Ileocecal tuberculosis

Author Affiliations: Department of Surgery, University of Virginia Health System, Charlottesville.

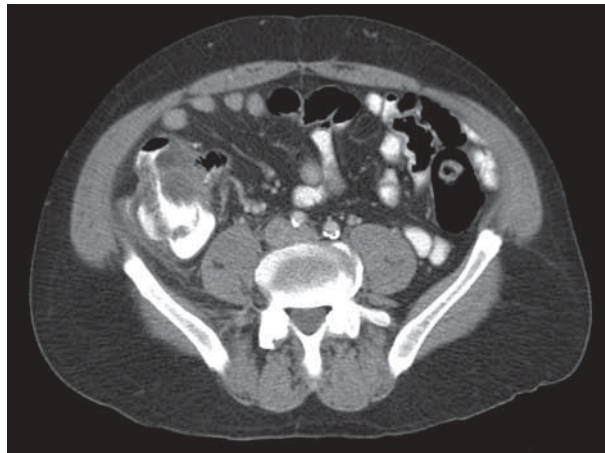


Figure 1. Abdominal computed tomography shows a contrast-containing 4.4 × 6.6-cm mass in the right lower quadrant with inflammatory changes surrounding the inferior aspect.

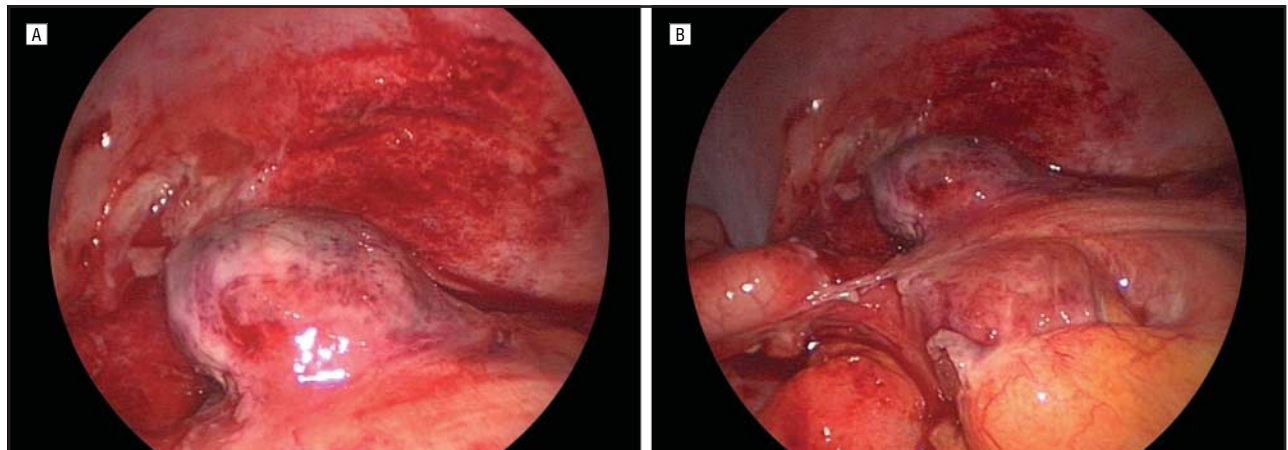


Figure 2. Laparoscopic view of the mass (A) and its relation to the cecum after being dissected off the anterolateral abdominal wall (B).