

Curative Medical Treatment for Acute Appendicitis without Surgical Appendectomy (Jaber Maneuver)

Mustafa Jaber* and Diao Eddin

Cairo University, Egypt

*Corresponding author

Mustafa Jaber, Cairo University, Egypt, Ph: +962 79-502-0135; +962 79-562-3393; E-mail: dr.diaa@yahoo.com

Submitted: 15 Aug 2019; Accepted: 27 Aug 2019; Published: 31 Aug 2019

Abstract

Clinical and Pathological evaluation

Acute abdomen with a mixture of modern radiographic images, diagnostic laboratory investigations and clinical observation such as (McBurney's triangle manifestations with rebound tenderness) [1]. All these signs suggest firmly acute appendicitis with mucosal viral or bacterial infection within the narrow lumen of appendix leading to luminal obstruction, this leads to increase the mucosal secretions, and inflammatory exudates, which increase the intraluminal pressure, obstructed lymphatic drainage. Edema and mucosal ulceration develop with bacterial transudation to the submucosa. Resolution may occur at this point either spontaneously or in response to antibiotics.

Progressive complications

The condition may progress, further distention of the appendix may cause venous obstruction leading to ischemia of appendicular wall and this leads to more bacterial invasion in muscularis propria and submucosa producing Acute Appendicitis. Ischemic necrosis of appendix may produce Gangrenous Appendicitis with free bacterial contamination of the peritoneal cavity and greater omentum and other complications such as peritonitis, appendicular abscess, gangrenous appendicitis with perforation, etc...

Etiology (predisposing factors)

Obstruction of the appendiceal orifice by: [2]

- Faecolith (composed of fecal material, calcium, phosphate, bacteria, and epithelial debris)
- Rarely a Foreign Body is incorporated in faecolith such as Grapes, Apple, Chili, Orange, Sesame and or Guava seeds, etc...
- Fibrosis.
- Parasites (particularly Oxyuris vermicularis)
- Carcinoma of the caecum

Traditional treatment

Up until now, appendectomy is the first line treatment of appendicitis as all medical references claims [3].

Conclusion

In the last 10 years, Following a deep understanding of the onset of appendicitis and the whole process of complications, I tried certain steps of treatment (Jaber Maneuver) for about 300 patients and all of them resolve in my private clinic without any surgical intervention with a 100% ratio of success (males and females of different ages).

References

1. Sandy Craig, Barry E Brenner (2019) Appendicitis Clinical Presentation: History, Physical Examination, Appendicitis and Pregnancy. <https://emedicine.medscape.com/article/773895-clinical>
2. WebMD (2004) Appendicitis. <https://www.webmd.com/digestive-disorders/digestive-diseases-appendicitis>
3. Mayo Clinic Staff (2019) Appendicitis - Diagnosis and treatment- Mayo Clinic.
4. <https://www.mayoclinic.org/diseases-conditions/appendicitis/diagnosis-treatment/drc-20369549>

Copyright: ©2019 Mustafa Jaber. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.