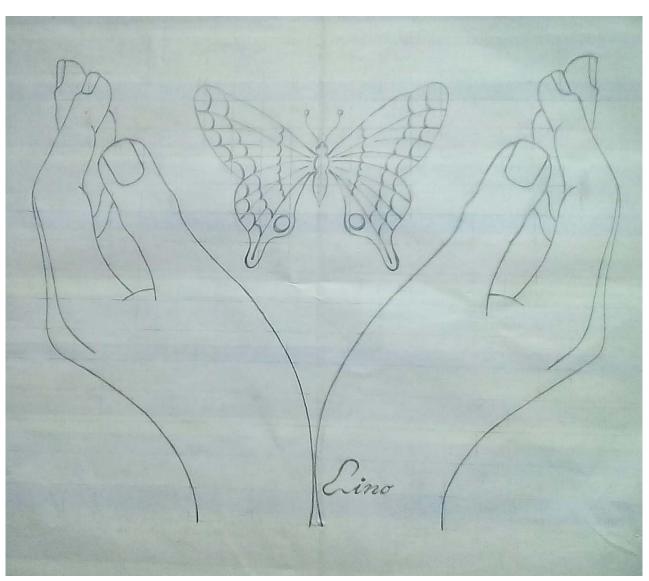
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An occasionally finding of Situs Inversus Viscerum: A Case Report.

* Tribuzio L., ** Pedone S., ** Paparello P.T., *** Marchitto N., *** Candreva R., *** Nardone M.S., ***Faiola E., **** Raimondi G.

* Speech Therapist, AttentaMente, Fondi, (Italy); ** Psicologist, AttentaMente, Fondi, (Italy);

** Med-Inf Association, Fondi (Latina); *** AUSL Latina, (Italy);

*** Sapienza University of Rome (Italy)

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Corresponding Authors: Tribuzio Luca. e-mail: lucatribuzio.log@gmail.com

ABSTRACT

Background: Situs inversus totalis (SIT) is a rare disease in which there is transposition of the thoracic and abdominal organs. We report the case of a 73-year-old patient suffering from acute addominal pain diagnosed in the first instance by ultrasound exam in suspicion of right renal colic. During the ultrasound evaluation anatomical findings compatible with the diagnosis of situs inversus totalis are noted. Therefore, the patient underwent computed tomography examination for a definitive diagnosys. Aim: The purpose of this Case Report is to summarize the current knowledge of the anatomical peculiarities linked to situs inversus totalis. Case Report: Our research group followed Mr. S.G. 73-year-old suffering from acute abdominal pain radiating to the right flank associated with fever. Mr. S.G. reports that he is being treated for Parkinson's disease. It denies other noteworthy pathologies except dextrocardia occasionally found during echocardiographic examination. For the finding of acute abdominal pain radiating to the right side, Mr. S.G. he underwent an ultrasound examination which revealed: "III degree calico-pyelic dilatation of the right kidney. Presence of situs viscerum inversus". Results: A rare anatomical condition known as situs inversus total was found during the clinical and instrumental diagnostic process for a case of acute abdominal pain. The presence of total situs inversus did not lead to diagnostic difficulties as the pulmonary and renal anatomy were easily assessable even in the condition of total situs inversus. **Discussion**: The presence of total situs inversus can determine false diagnostic hypotheses in the phase of approach to the objective clinical examination. Instrumental diagnostics is an indispensable method for optimizing fine diagnosis in rare conditions that may occur few times in the course of a doctor's life, avoiding diagnostic errors with fatal repercussions (diverticular perforation or appendicitis). Conclusions: In the presence of rare diseases such as total situs inversus can represent a condition at high risk of diagnostic error for abdominal surgical diseases. who see in the clinical subject an initial diagnosis based on the normal anatomy of the human body. Ultrasound and tomographic instrumental diagnostics represent an indispensable aid to avoid misdiagnosis even if based on correct clinical assumptions based on the normal anatomy of the human body.

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