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Diagnostic Value of Ultrasound Findings in Mesenteric Lymphadenitis in Children with Acute Abdominal Pain

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Abstract:

Backgrounds/Objective: The aim of this study was to compare abdominal sonographic features of patients with mesenteric lymphadenitis versus sonographic features of the asymptomatic children, in order to identify diagnostic criteria for mesenteric lymphadenitis. **Patients and Methods:** Ultrasound data from 113 children with acute abdominal pain whose suspected sonographic diagnosis was mesenteric adenitis or ileitis was inspected in a child hospital in March 2004 to March 2005. The final diagnoses were established after patient management and follow-up. As for the control group, a hundred asymptomatic children were referred from health centers or kindergartens. **Results:** No para-aortic lymphadenopathy was found in any of the subjects from the study and the control groups. The number of enlarged mesenteric lymph nodes observed in symptomatic children was significantly greater than the figure in asymptomatic children ($P = 0.0001$). The highest rate of sensitivity was seen with the presence of RLQ lymphadenopathy (94.7%) and the highest rate of specificity was seen with the presence of lymphadenopathy in two or three areas of LUQ or mid-abdomen together; lymphadenopathies larger than 6mm in RLQ; presence of more than 4 lymph nodes (with any size) in a sonographic image from RLQ; or thickening of terminal ileum more than 8mm (92%-100%) in the diagnosis of mesenteric lymphadenitis. **Conclusion:** In children with acute abdominal pain due to causes such as appendicitis which cannot be confirmed by ultrasound and the findings consist of only enlarged mesenteric lymph nodes ($\geq 4\text{mm}$) and/or mural thickening of the terminal ileum ($\geq 8\text{mm}$), the probable diagnosis would be mesenteric adenitis-ileitis and surgery is not required; but close observation is recommended.

Keywords:

[mesenteric lymphadenitis](#)

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