

4<sup>th</sup> International Conference and Expo on

# SURGERY AND TRANSPLANTATION

### July 22-23, 2019 | Brussels, Belgium

Diaa Eddin Mustafa Jaber et al., Adv Surg Res 2019, Volume 3

## CURATIVE MEDICAL TREATMENT FOR ACUTE APPENDICITIS WITHOUT SURGICAL APPENDICECTOMY (JABER MANEUVER)

#### Diaa Eddin Mustafa Jaber and Mustafa Jaber

Jordan University Hospital, Jordan

**Clinical & 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). All these signs suggest firmly acute appendicitis with mucosal viral or bacterial infection within the narrow lumen of appendix leading to luminal obstruction and 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 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) and carcinoma of the caecum.

**Traditional Treatment:** Till now appendectomy is the first line treatment of appendicitis as all medical references claims.

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

### BIOGRAPHY

Diaa Eddin Mustafa Jaber practiced medicine as a general practitioner since 1976, he was born in Palestine on 1947 and graduated from the faculty of medicine– Cairo University on 1975 with MBBCh Degree in medicine and became a consultant in modern medicine on 1985. He holds many certificates of completion in training programs by the Jordanian Medical Council (JMC) and foreign medical establishments in seven different topics. He has over than 28 researches and discoveries in medicine about Alopecia totalis, autism, deaf-mutes, cerebral palsy, atrophy and demyelination, scleroderma, hormonal deficiency (AMH), infantile uterus, pinpoint ext., ovarian cysts and fibroids treatment without surgery, elevated testes treatment without surgery. He attended and participated as a speaker in some medical international congresses like Cleveland clinic foundation about minimally invasive valve surgery, the 1st Mediterranean Congress of sexual dysfunction in Cairo, In XV World Congress of Sexology in Paris and Heart beat international program for international accurate ECG with modern communication methods and value-added programs of dermatology (VAPs –D) Pfizer in Egypt.

dr.diaa@yahoo.com

Surgery Congress 2019

Journal of Advanced Surgical Research | ISSN: 2591-7765 | Volume 3

