Acute appendicitis is one of the most common inflammatory diseases of the gastrointestinal tract. In the literature oxyuriasis has been shown to play a causal role in appendicular pain and chronic inflammation but relationships between the incidence of Enterobius vermicularis (EV) and the origin of acute inflammation in the appendix are discussed controversial (1-7).

**METHODS**

We report the case of a nine-year-old boy who presented at our emergency department with a 2-day history of abdominal pain. On examination he presented with fever and an exquisite tenderness at the right iliac fossa with signs of a beginning local peritonitis. Laboratory results revealed an inflammatory syndrome with an elevated white cell count and an elevated CRP. In summary, he presented with all the typical signs of an acute appendicitis.

**RESULTS**

The patient underwent emergent laparoscopic appendectomy. Intraoperative findings showed the typical signs of acute appendicitis with a thickened and very well vascularised appendix. After dissecting the mesentery by a bipolar cautery device the appendix was resected using an endoscopic Hem-o-lock clip device. Somewhat shockingly we then observed at the clipping-line several moving pinworms protruding out (Image 1). A careful cleaning and disinfection with Betadine solution was performed before overstitching the clipping line with some PDS-5-0-sutures. Finally, the abdominal cavity was rinsed with 10 litres of warm Ringer solution.

Histopathological examination revealed numerous EV-species and they were also identified to be the cause of the acute inflammation of the appendix. After initiating an antiparasitic therapy the patient recovered well and also had a complete uneventful follow-up.

**REFERENCES**