

Review Only

GS07 Appendicectomy

What is appendicitis?

Appendicitis means inflammation of the appendix. The appendix is a part of the gut (see figure 1). It has no function in human beings. When it is inflamed it causes pain and makes you feel unwell. Appendicitis is a common problem that is best treated by an operation.

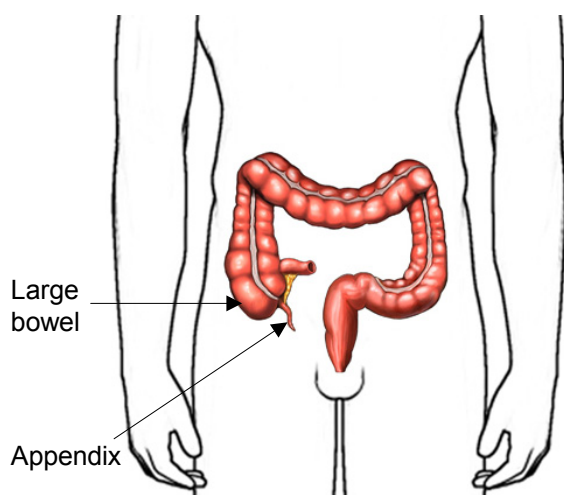


Figure 1

The position of the appendix

Your surgeon has recommended an appendicectomy, which is an operation to remove your appendix. However, it is your decision to go ahead with the operation or not. This document will give you information about the benefits and risks to help you make an informed decision.

If you have any questions that this document does not answer, you should ask your surgeon or any member of the healthcare team.

How does appendicitis happen?

The cause of appendicitis is unclear. Inflammation is often caused by bacterial infection. The appendix becoming blocked appears to make inflammation more likely.

What are the benefits of surgery?

You will no longer get appendicitis. Surgery should prevent you from having serious complications that appendicitis can cause.

Are there any alternatives to surgery?

Sometimes the body's defence mechanisms will fight infection in the appendix. This results in inflammation of the tissues around the appendix. An abscess (a collection of pus in the tissues) can sometimes form.

Antibiotics can be used to treat inflammation or an abscess, but only if you are well enough. If an abscess continues or if you become unwell even with antibiotics, you will need an operation.

What will happen if I decide not to have the operation?

Surgery is strongly recommended as it is the only dependable cure. If appendicitis is left untreated, the appendix may burst and infection will spread throughout the abdomen (peritonitis). This is life-threatening and needs a bigger operation with a higher risk of serious complications.

Even if antibiotics cure your appendicitis, 1 in 6 people will have another episode of appendicitis. So most surgeons recommend an appendicectomy to prevent another infection.

What does the operation involve?

An appendix can be removed by using the laparoscopic ('keyhole') technique or by an open cut in the abdomen.

Your surgeon will let you know if the laparoscopic technique will be used to confirm you do have appendicitis and if the appendix will be removed using this method.

The healthcare team will carry out a number of checks to make sure you have the operation you came in for. You can help by confirming to your surgeon and the healthcare team your name and the operation you are having.

An appendicectomy is usually performed under a general anaesthetic and your anaesthetist will discuss this with you. You may also have injections of local anaesthetic to help with the pain after surgery. Your surgeon or anaesthetist may give you antibiotics during the operation to reduce the risk of infection. The operation usually takes between half an hour and an hour.

In the open operation, your surgeon will make a cut in the abdomen and remove the inflamed appendix (see figure 2). If the appendix is not inflamed, it will be removed anyway. Your surgeon will then examine other parts of the bowel and nearby organs to find a cause for your pain. If a cause is found and you need further surgery, it may be performed at the same time.

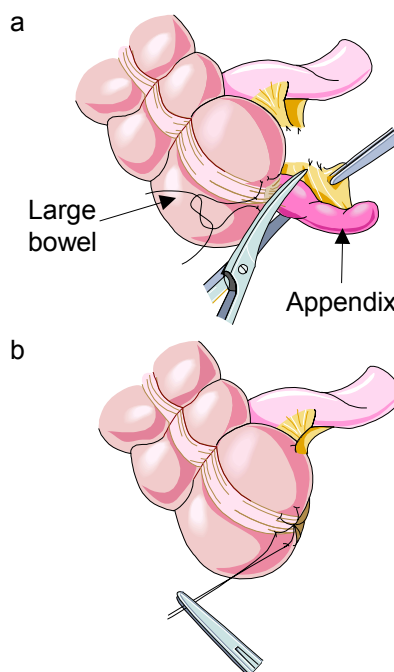


Figure 2

- a After securing the blood supply, the base of the appendix is stitched and the appendix removed
- b The hole in the large bowel is then stitched

What complications can happen?

The healthcare team will try to make your operation as safe as possible. However, complications can happen. Some of these can be serious and can even cause death. You should ask your doctor if there is anything you do not understand. Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. The risks are higher if you are having surgery to remove a burst appendix.

The complications fall into three categories.

- 1 Complications of anaesthesia
- 2 General complications of any operation
- 3 Specific complications of this operation

1 Complications of anaesthesia

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

2 General complications of any operation

- **Pain**, which happens with every operation. The pain felt after your operation should be less severe than the pain from the appendicitis. The healthcare team will try to reduce your pain. They will give you medication to control the pain and it is important that you take it as you are told so you can move about and cough freely.
- **Bleeding** during or after surgery. If bleeding happens within the abdomen, another operation may be needed.
- **Unsightly scarring** of the skin.
- **Blood clots** in the legs (deep-vein thrombosis), which can occasionally move through the bloodstream to the lungs (pulmonary embolus), making it difficult for you to breathe. The healthcare team will assess your risk. Nurses will encourage you to get out of bed soon after surgery and may give you injections, medication or special stockings to wear.
- **Infection of the surgical site** (wound) (risk: 1 in 6). To reduce the risk of infection it is important to keep warm around the time of your operation. Let a member of the healthcare team know if you feel cold. In the week before your operation, you should not shave the area where a cut is likely to be made. Try to have a bath or shower either the day before or on the day of your operation. After your operation, you should let your surgeon know if you get a temperature, notice pus in your wound, or if your wound becomes red, sore or painful. An infection usually settles with antibiotics but you may occasionally need another operation.

3 Specific complications of this operation

- **Incorrect diagnosis**, as there is no definite way of confirming the diagnosis without an operation (risk: 1 in 10). It is safer to remove a normal appendix than to leave an inflamed appendix alone, which may cause peritonitis.

- **Developing an abscess** within the abdomen (risk: less than 7 in 100). If this does not improve with antibiotics, the pus will need to be drained surgically.
- **Difficulty passing urine**, which may need a catheter (tube) for a day or two.
- **Vomiting**, because the bowel stops working for a few days after the operation.
- **Developing a leak** where the appendix has been cut off from the bowel. This may lead to an abnormal connection (fistula) from the bowel to the cut in the skin. This is rare and usually heals on its own but may occasionally need further surgery.
- **Obstruction of the bowel** (risk: 2 in 100). This is due to adhesions (scar tissue) at the site of surgery and can happen many years after the operation.
- **Pylephlebitis**, where infection spreads to the liver. This is rare.

How soon will I recover?

• In hospital

After the operation you will be transferred to the recovery area and then to the ward. Your surgeon will let you know how inflamed your appendix was and will decide if you need to continue treatment with antibiotics.

It may be some time before you can eat and drink properly so you may need a drip (small tube).

Simple painkillers should allow you to move about freely. You should be able to go home three to five days after an operation for simple appendicitis or about a week following a burst appendix.

If you are worried about anything, in hospital or at home, contact a member of the healthcare team. They should be able to reassure you or identify and treat any complications.

• **Returning to normal activities**

You should be able to return to work after about four weeks, depending on the extent of surgery and your type of work. Some people may need to stay off work longer.

Your doctor may tell you not to do any manual work at first and you should avoid heavy lifting for a few weeks.

Do not drive until you are confident about controlling your vehicle and always check with your doctor and insurance company first.

• **Lifestyle changes**

If you smoke, try to stop smoking now. Stopping smoking will improve your long-term health.

For help and advice on stopping smoking, go to www.smokefree.nhs.uk.

You have a higher chance of developing complications if you are overweight.

For advice on maintaining a healthy weight, go to www.eatwell.gov.uk.

• **Exercise**

Regular exercise can reduce the risk of heart disease and other medical conditions, improve how your lungs work, boost your immune system, help you to control your weight and improve your mood. Exercise should improve your long-term health.

For information on how exercise can help you, go to www.eidoactive.co.uk.

Before you start exercising, you should ask a member of the healthcare team or your GP for advice.

• **The future**

Most people make a full recovery and can return to normal activities.

Summary

Appendicitis is a common condition where the appendix becomes inflamed. Surgery should prevent you from having serious complications that appendicitis can cause. Surgery is usually safe and effective. However, complications can happen. You need to know about them to help you make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

Further information

- NHS smoking helpline on 0800 022 4332 and at www.smokefree.nhs.uk
- www.eatwell.gov.uk – for advice on maintaining a healthy weight
- www.eidoactive.co.uk – for information on how exercise can help you
- www.aboutmyhealth.org – for support and information you can trust
- NHS Direct on 0845 46 47 (0845 606 46 47 – textphone)

Acknowledgements

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