Appendicectomy

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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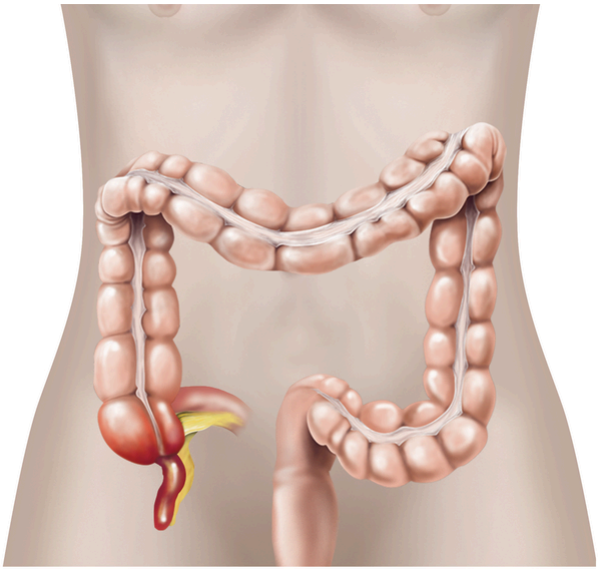
What is an appendicectomy?

An appendicectomy is a procedure to remove your appendix (part of your large bowel).

Appendicitis means inflammation of your appendix and is a common problem that is best treated by surgery.

An inflamed appendix



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What are the benefits?

Surgery removes the inflamed appendix and allows infected pus to be washed out. The aim is to prevent the serious complications that appendicitis can cause.

Are there any alternatives?

Studies have shown that antibiotics can be as effective as surgery. However, your recovery may be longer and sometimes the antibiotics are not effective and an abscess (a collection of pus) can form in the tissues. If an abscess continues or if you become unwell even with antibiotics, you will need a procedure.

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

If appendicitis is left untreated, your appendix may burst and infection will spread. This is life-threatening and needs a larger procedure with a higher risk of developing serious complications.

2 in 3 people who have antibiotics to treat appendicitis may be cured. 1 in 6 people whose appendicitis is cured by antibiotics will have another episode of appendicitis in the future.

What does the procedure involve?

The procedure is performed under a general anaesthetic and usually takes 1 to 2 hours.

Your surgeon will tie off the blood supply to your appendix, stitch the base and then remove it.

If your appendix is not inflamed and there is no other obvious cause for the pain, your surgeon will usually remove your appendix anyway. The reason is that sometimes the inside of the appendix can be inflamed while the outside looks normal.

Laparoscopic (keyhole) surgery

Your surgeon may use keyhole surgery as this is associated with less pain, less scarring and a faster return to normal activities.

Open surgery

The procedure is the same but it is performed through a larger cut on your lower abdomen.

What complications can happen?

The healthcare team are trained to reduce the risk of complications.

Any risk rates given are taken from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. Some risks are higher if you are older, obese, have other health problems or you smoke. Health problems include diabetes, heart disease or lung disease.

Possible complications of this procedure are shown below. Some can be serious and may even cause death.

General complications of any procedure

- Bleeding during or after the procedure.
- Infection of the surgical site (wound).
- Allergic reaction to the equipment, materials or medication.
- Developing a hernia in the scar.

- Blood clot in your leg (deep-vein thrombosis – DVT).
- Blood clot in your lung (pulmonary embolus), if a blood clot moves through your bloodstream to your lungs.
- Chest infection. Your risk will be lower if you have stopped smoking and you are free of Covid-19 (coronavirus) symptoms for at least 7 weeks before the procedure.

Specific complications of this procedure

Keyhole surgery complications

- Damage to structures such as your bowel, bladder or blood vessels.
- Developing a hernia near one of the cuts used to insert the ports.
- Surgical emphysema (a crackling sensation in your skin caused by trapped carbon dioxide), which settles quickly and is not serious.
- Gas embolism. This is when gas (carbon dioxide) gets into the bloodstream and blocks a blood vessel.

Appendicectomy complications

- Incorrect diagnosis, as there is no definite way of confirming the diagnosis without surgery.
- Developing an abscess within your abdomen.
- Difficulty passing urine. You may need a catheter (tube) in your bladder for 1 to 2 days.
- Continued bowel paralysis (ileus), where your bowel stops working, causing you to become bloated and to be sick.
- Developing a leak where your appendix has been cut off from your bowel.
- Tissues can join together in an abnormal way (adhesions). Adhesions can lead to bowel obstruction.
- Stump appendicitis, where part of your appendix is left behind.

Consequences of this procedure

- Pain.
- Scarring of your skin, which can be unsightly.

What happens after the procedure?

You should be able to go home 3 to 5 days after a procedure for simple appendicitis or about a week after a procedure for a burst appendix.

You should be able to return to work after about 2 to 4 weeks, depending on how much surgery you need and your type of work.

Regular exercise should improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

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

Summary

Appendicitis is a common condition where your appendix becomes inflamed. Surgery should prevent the serious complications that appendicitis can cause.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatment options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Reviewer

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Illustrator

