
Appendectomy

Summary

- Appendectomy is surgery to remove the appendix, which is usually found in the right lower side of the abdomen.
 - Appendectomy is usually carried out on an emergency basis to treat appendicitis (inflamed appendix).
 - A ruptured appendix can cause peritonitis, which is a potentially life-threatening complication.
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An appendectomy is the surgical removal of the appendix, which is located in the right lower side of the abdomen. This operation is usually carried out on an emergency basis to treat appendicitis (inflamed appendix). This may occur as a result of an obstruction in part of the appendix. Another name for this operation is an appendicectomy.

Some common symptoms of appendicitis are nausea, vomiting, constipation and pain. The pain is initially felt in the centre of the abdomen and later moves to become a sharper pain in the right lower abdomen. The area is tender to the touch. Occasionally, some of these symptoms may be absent and it becomes necessary to investigate the abdominal cavity to make a diagnosis.

Problems associated with appendicitis

Appendicitis occurs when the appendix is blocked and becomes infected due to an invasion of intestinal bacteria. There is no single cause, but appendicitis may be due to:

- A bowel adhesion
- Swelling of the lymphatic tissue of the appendix due to a viral infection
- A foreign body
- A faecalith (a small, hard mass of faeces), which causes blockage, inflammation and infection.

If appendicitis is left untreated, it may cause the appendix to rupture (burst). If the appendix ruptures, the infected contents flow into the abdominal cavity. This can cause a much more serious medical emergency known as peritonitis, which is inflammation of the membranes lining the abdominal wall and organs. Without prompt treatment, peritonitis can be life threatening.

Surgery is the preferred treatment for appendicitis. Delaying the operation (in the hope that the appendix will 'settle down') only increases the risk of suffering a ruptured appendix.

Medical issues to consider

Once in hospital, your temperature, pulse, breathing pattern and blood pressure will be charted. If the surgeon suspects your appendix shows signs that it may rupture, you will be taken to the operating theatre as soon as possible.

Where the diagnosis is less clear, further examination using methods such as CT scans or ultrasound and blood tests may be needed before a decision to operate can be made.

Appendectomy procedure

The two main surgical techniques include open and laparoscopic appendectomy. These involve:

- **Open appendectomy** – an incision is made through the skin, the underlying tissue and the abdominal wall in order to access the appendix.
- **Laparoscopic ('keyhole') appendectomy** – this involves making three small incisions in the abdomen, through which particular instruments are inserted. A gas is gently pumped into the abdominal cavity to separate the abdominal wall from the organs. This makes it easier to examine the appendix and internal organs.

The type of operation you have will depend on how severe your appendicitis is. The surgeon will discuss your options with you. If there is anything you want to know or are not clear about, it is important to ask your doctor or surgeon to explain it in terms you can understand. A laparoscopic appendectomy may need to become open surgery if the appendix has ruptured.

Once the appendix is accessed by either open or laparoscopic surgery, the blood vessels that supply it are clamped and the appendix is cut and removed. In laparoscopic appendectomy, the appendix is removed through one of the small 'keyhole' incisions.

Immediately after appendectomy

After the operation, you can expect:

- Nurses will regularly record your temperature, blood pressure, pulse and respiration.
- Nurses will observe your wound and level of pain, and give you painkillers as ordered by your doctor.
- If there are no complications, you can get out of bed quite soon after the operation.
- Early movement is desirable, but caution is needed for climbing stairs so as not to strain the abdominal muscles.
- You should be able to eat about 24 hours or so after the operation.
- You should be able to leave hospital two to three days after an uncomplicated appendectomy.
- If you have external sutures (stitches), you usually have them removed after one week or so. Sometimes, surgeons use dissolvable sutures.

Medical treatment for peritonitis

If your appendix ruptures and you develop peritonitis, you will have antibiotics prescribed. Your surgeon will need to drain out the infected material and disinfect your abdominal cavity. A nasogastric tube (feeding tube through the nose) may need to be inserted into your stomach for a day or two, and intravenous fluids will be administered into a vein in your arm. You can expect a longer hospital stay.

Complications of appendectomy

All surgery carries some degree of risk. One of the most common complications following appendectomy is infection. Around 20 per cent of people who have a ruptured appendix develop an abscess (ball of pus) within the abdominal cavity about two weeks or so after the appendectomy. These abscesses must be surgically drained. Another common type of infection following appendectomy is infection of the wound.

Taking care of yourself at home after appendectomy

Be guided by your doctor, but general suggestions include:

- Follow the dietary advice you are given.
- You may like to use a mild laxative for the first few days.
- Drink plenty of water every day to help prevent constipation.
- Make sure you have adequate rest. A fast lifestyle, with inadequate diet, will slow your recovery.

- Avoid lifting heavy objects and stair climbing, so that you don't strain your abdominal muscles.
- After a few days, slowly resume your normal activities. Include regular, gentle exercise.

Long-term outlook after appendectomy

The appendix appears to be a redundant organ, since the human body manages quite well without it. There is no chance of ever experiencing appendicitis again, because the appendix is entirely removed.

Where to get help

- Your doctor
- Emergency department of your nearest hospital
- In an emergency, always call triple zero (000)

Things to remember

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