

PATIENT INFORMATION: APPENDECTOMY

An **appendectomy** is the surgical removal of the appendix. The appendix is a three to six-inch long, tube-like structure that projects from the junction of the small and large intestine.

Appendicitis is caused by the obstruction of the appendix by fecal matter, etc., which then leads to inflammation.

Signs and Symptoms

Signs and symptoms of appendicitis are first a vague pain in the abdomen around the naval, then, over the next several hours, the pain localizes in the right lower side of the abdomen. The abdomen can become hard and very sensitive touch. Generally, the pain is accompanied by nausea, vomiting and a slight fever. Appendicitis can occur at any age but is most common between the ages of 15 & 45.

Diagnosing Appendicitis

A diagnosis of appendicitis is usually made based on your symptoms, physical examination, and diagnostic tests such as complete blood count, urinalysis, or abdominal ultrasound / x-ray or CT scan.

Preparation for Surgery

Stop eating solid food at midnight the night before your surgery. You may have clear fluids (black tea, apple juice or water) only up until three hours before your scheduled arrival time. Do

not chew gum or tobacco. You may brush your teeth and just rinse your mouth. Surgery may be delayed or postponed if this requirement is not met.

The Surgical Procedure

Today, a surgeon can perform an appendectomy in one of two ways: through what is called an open operation or through the laparoscopic technique. There are particular deciding factors as to what is the best method of removal for you, and the choice is up to the surgeon in your particular circumstance.

The Open Technique

In this operation, the surgeon makes a short incision through the skin and underlying fat. The muscles of the wall are then separated, revealing the peritoneum, which is the lining of the abdominal cavity. The peritoneum is cut to reveal the cecum, the section of the large intestine to which the appendix is attached.

After the small intestine has been moved aside, the appendix is carefully freed from the surrounding structures. Blood vessels around the site are tied off.

At this point, the appendix is tied off and severed. The appendix is then sent to the pathology laboratory for examination. Finally, the peritoneum, the muscle wall, and the skin incision

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are closed. Closure of the skin is done either with sutures or tiny staples.

The Laparoscopic Technique

The laparoscopic method of removing your appendix is the treatment of choice. A laparoscope is a long metal tube with a lens connected to a TV camera. Surgical instruments, called cannulas, are inserted into other small openings and used to remove the appendix. Laparoscopic appendectomy is a safe alternative to the open technique. You may resume normal activity more quickly than the open technique permits. This method is not for every patient, and it is up to you and your surgeon to decide whether it is right for you.

Regardless of the type of procedure you undergo, minimal postoperative discomfort is likely to occur after an appendectomy. Your doctor will prescribe appropriate medication as needed. Each method takes approximately one hour.

Recovery from the Operation

You will remain in the recovery room until you meet specified criteria and pain/nausea are under control. If you had an open appendectomy, you will be up and walking within six hours. Expect to be discharged from the hospital, barring complications, in one to two days. If you have a laparoscopy, you

may be discharged on the day of your operation.

Your doctor may instruct you to refrain from jogging and lifting heavy objects for one to several weeks, depending on the type and complexity of your operation. Diet is resumed slowly, and solids should be avoided until passing gas or your bowels move.

Complications

Complications are rare following an appendectomy. However, if the appendix ruptures before surgery, **peritonitis**, a potentially life-threatening infection of the abdominal cavity, may occur. Treatment then will include intravenous administration of antibiotics to control the infection. Wound infections can occur but are usually treated without the need for further surgery.

If your surgery was done laparoscopically, a gas is inserted into your abdomen during surgery that inflates it allowing the instruments and telescope to be maneuvered easily. Although the gas is removed at the end of the procedure, occasionally small amounts remain trapped that can irritate nerves and cause aching pain in your arm or neck post-op. It is harmless and will correct itself within first 24 hours. In the meantime, heat, sitting up and analgesic will provide comfort.

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