

# Appendicectomy Information for Patients

## What is the appendix?

The appendix is a small pouch which is connected to the large intestine (large bowel). It is found in the lower right side of the abdomen. It is not clear what the appendix does for our bodies.

## What is appendicitis?

Appendicitis commonly occurs suddenly (acute appendicitis) where inflammation or infection of the appendix causes symptoms of pain, high temperature, nausea, vomiting and occasionally diarrhoea. Pain is usually constant, severe and typically starts in the middle of your abdomen and travels to the lower right hand side where the appendix lies.

The reason why the appendix becomes inflamed is not entirely known, but may be due to a hard piece of faeces getting stuck in the appendix causing bacteria to multiply quickly and cause inflammation, swelling and formation of pus.

A swollen appendix can burst and if not treated can cause a serious infection of the lining of the abdomen (peritonitis) or a pus filled abscess.

## Diagnosing appendicitis

Appendicitis can be difficult to diagnose because people have different symptoms. There is no definitive test to diagnose appendicitis.

The surgical team may recommend a blood test or an ultrasound or CT scan to help confirm the diagnosis.

Sometimes if your diagnosis remains uncertain the doctors may wait up to 24 hours to see how your symptoms develop.

## What is the treatment for appendicitis?

If the appendix has burst and caused a severe infection, the doctors may initially decide to treat you with a course of antibiotics before operating. In this case they may advise you to wait and let things settle down for several weeks until the infection has disappeared before having surgery. What are the risks?

All surgery has some risks, and complications occur in about 5 in 100 cases. Most complications are mild and easily resolved.

- Injury to the intestine (bowel) or other internal organs.
- Injury to blood vessels causing internal bleeding.
- Infection.
- Bleeding from the wound (haematoma), bruising.
- Deep vein thrombosis (DVT) (Blood clot) and Pulmonary embolism (PE) (Blood clot in the lungs).

- Rarely a hernia (a lump or bulge) may develop around one of the wound sites. This is caused by a weakness of the abdominal muscles and may require corrective surgery in the future.
- Very rarely, severe complications may result in death during or after the operation.

### **What happens during the operation?**

An appendicectomy is performed by open or keyhole (laparoscopic) surgery.

- Keyhole surgery: Small cuts are made in the abdomen and a small tube is inserted with a light and camera that helps the surgeon see inside the abdomen and remove the appendix.
- Open surgery: A larger cut is made where the appendix lies. The appendix is then removed directly.

### **What happens after the operation?**

Your blood pressure, pulse and wounds will be monitored closely over the first few hours. You will normally be able to start drinking shortly after the procedure, and can start eating as soon as you are hungry. You will normally be able to get out of bed as soon as you feel well enough to although the nurses may assist you the first time.

You may experience some pain from your wounds. If you do, you will be given painkillers. Before your discharge you will be given a supply of painkillers, dressings and post-operative instructions. Your GP will be notified of your discharge. A hospital follow-up appointment may be arranged for you.

### **How long will it take to recover from the anaesthetic?**

Whilst most of the effects of anaesthesia wear off in a few hours, it is common to have poor concentration and memory for the first day or so. It is important therefore that you do not make important decisions, sign legal documents or operate machinery or equipment for at least 24 hours after the anaesthetic. Muscle aches or headaches may also be experienced over the first few days.

### **Will I feel sick after surgery?**

Nausea and vomiting are not unusual after surgery, we endeavour to keep this at a minimum. Medication can be used during the anaesthetic and afterwards to control this. Take extra rest and try to drink something regularly. If you can tolerate food, eat small frequent snacks.

### **How much pain should I expect?**

It is normal to have wound pain after surgery and your tummy may feel quite bloated and tender. This should start to subside after a few days. After about 10 days most of the soreness should disappear. You may also notice that you have a slightly sore throat. This is due to the "breathing" tube placed in your throat during surgery and should subside in a day or so. To minimise discomfort, you should take the painkillers that you have been given, regularly over the first few days (ensuring that you do not exceed the dose prescribed). After your discharge, if you have any queries or problems with your painkillers you can seek advice from your local GP or chemist.

## What daily activities can I do?

You can return to normal physical activities when you feel comfortable. It is normal to feel tired after surgery, so take some rest, two or three times a day, and try to get a good night's sleep. After a week or so, you should be able to resume most of your normal daily activities. You should avoid heavy lifting and vigorous exercises for at least two weeks.

## When can I start driving?

You should not drive for at least one week. Before driving you should ensure that you can perform a full emergency stop, have the strength and capability to control the car, and be able to respond quickly to any situation that may occur. Please be aware that driving whilst unfit may invalidate your insurance.

## When can I return to work?

You can return to work as soon as you feel well enough. This will depend on how you are feeling and the type of work that you do. If you have a desk job you may feel ready to return in a week or so. If you are involved in manual labour or heavy lifting you may require a bit more time. Typically, you will need between two and three weeks off work.

## How do I care for my wounds?

If there are any dressings in place, you can remove them 24-48 hours after your operation. Initially it is preferable that you take a shower, if you do not have a shower a short bath would be better to prevent the wounds becoming 'soggy'. There is no need to apply further plasters unless you feel it would be more comfortable to do so.

The incisions will usually be closed with staples. The ward nurses will arrange for you to go to the practice nurse at your GP surgery to remove them. The incisions will probably be red and uncomfortable for 1-2 weeks and some bruising and swelling is common. After the incisions have healed there will be a small, scar like scratch. These scars first appear pink, but over the next few months they will become less and less noticeable. There may be some persistent bumpiness and bruising around the wounds, but these will gradually improve. You may also notice numb patches in the skin around the incisions. Whilst in most cases sensation will gradually return, occasionally the numbness may be permanent.

Occasional aches and twinges in the wounds can persist for several months. Rarely, a wound infection may develop during the first few weeks after surgery. Symptoms include increasing tenderness, pus-like discharge, swelling and redness of the wounds. If this occurs, visit your GP as you may need some antibiotics to resolve the infection and discomfort.

## Who can I contact if I am concerned after discharge?

If you have any concerns or experience any of the following symptoms, please contact the Surgical Assessment Unit (SAU) on 01274 383253 to speak with a member of the medical team who will offer advice. The SAU is open 24 hours a day.

- If you have a discharge of blood or pus coming from your wounds.
- If you develop fever or vomiting symptoms for several days.
- Persistent pain not relieved with your prescribed painkillers.
- Persistent abdominal distension (bloating of your tummy).
- Increasing pain or swelling around your wounds.

## Next Generation Text

We use Next Generation Text for people with hearing difficulties.

To contact us ring 18001 01274 followed by the telephone number you require.

## Smoking

Bradford Teaching Hospitals NHS Foundation Trust is a smoke-free organisation. You are not permitted to smoke or use e-cigarettes in any of the hospital buildings or grounds, with the exception of the smoking shelters which are provided for visitors and patients only.

## Wristbands

When you are in hospital it is essential to wear a wristband at all times to ensure your safety during your stay. The wristband will contain accurate details about you on it including all of the essential information that staff need to identify you correctly and give you the right care. All hospital patients including babies, children and older people should wear the wristband at all times.

If you do not have a wristband whilst in hospital, then please ask a member of staff for one. If it comes off or is uncomfortable, ask a member of staff to replace it.

If you need this information in another format or language, please ask a member of staff to arrange this for you.