

# Surgery or antibiotics for appendicitis? Here's what patients chose

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uncomplicated appendicitis," the researchers wrote in the Jan. 10 online edition of the journal *JAMA Surgery*.

Acute appendicitis involves a sudden and painful inflammation of the appendix, a tiny, finger-shaped organ attached to the lower right side of the abdomen. The exact function of the appendix remains unclear, but certainly people can live without it.

The real danger from appendicitis comes from the potential of the organ to burst, spreading infection throughout the abdomen. For this reason, surgical removal has long been the preferred option, although in many cases antibiotic therapy can ease the condition.

Each treatment option comes with its pros and cons. Surgery carries various risks of infection or complications, while [antibiotic therapy](#) may entail longer hospitalization times or the risk that the treatment may fail.

So, what would the average patient choose? To find out, the investigators asked more than 1,700 U.S. adults to imagine that they or their child had an acute case of appendicitis. The study participants were then given detailed information on three treatment options: laparoscopic surgery; "open" surgery; or antibiotic treatment.

Overwhelmingly, respondents opted for surgery— 86 percent chose laparoscopic appendectomy, nearly 5 percent chose [open surgery](#), while about 9 percent chose antibiotics alone.

People who chose surgery said they wanted a quick treatment and wanted to avoid any chance of a second episode of appendicitis. People who opted for antibiotics said their decision was largely based on wanting to avoid surgery.

Two doctors with experience in appendicitis said

(HealthDay)—Even though appendicitis often resolves with the use of antibiotics, the overwhelming majority of Americans would opt for surgery instead, a new survey finds.

Only about one in every 10 adults surveyed in the new study said they'd use antibiotics to ease an inflamed appendix, according to a team led by surgeon Dr. Marc Basson, of the University of North Dakota School of Medicine.

The study authors noted that's in line with most surgeons' assumptions about appendicitis cases: That people tend to want a quick removal of the vestigial organ.

But surgery—even a less invasive laparoscopic procedure—comes with risks, so Basson's team believes it's important to at least discuss the antibiotics option with patients.

Patients "deserve the chance to choose antibiotics alone if they [have] developed acute,

the survey gives surgeons valuable insight into patient preferences.

"It certainly brings to the forefront the need for us as a surgical community to be aware of changing priorities among patients, as well as our ongoing responsibility to help [patients](#) understand the ramifications of their decisions," said Dr. Robert Andrews. He directs acute care surgery at Lenox Hill Hospital in New York City.

Dr. Lauren Licata is a surgeon and assistant professor at the Zucker School of Medicine at Hofstra/Northwell, in Hempstead, N.Y. She said that "each choice, [surgery](#) or antibiotics, carries its own risks, [so] framing the discussion to help the patient be comfortable with their decision is essential."

But she said issues around antibiotic use, especially, are complex, and need to be thoroughly explained to the patient.

Most important is the worry that even if antibiotics reduce the inflammation, a second [appendicitis](#) flare-up might occur in the future. That could mean more CT scans and more unhealthy changes to "good" intestinal bacteria when [antibiotics](#) are used, she said.

**More information:** Robert Andrews, M.D., director, acute care surgery, Lenox Hill Hospital, New York City; Lauren Licata, M.D., assistant professor, Zucker School of Medicine at Hofstra/Northwell, Hempstead, N.Y.; Jan. 10, 2018, *JAMA Surgery*, online

There's more on appendicitis at the [U.S. National Institute of Diabetes and Digestive and Kidney Diseases](#).

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