Having an appendicectomy

This leaflet explains more about coming into hospital for an appendicectomy. If you have any further questions or concerns, please do not hesitate to speak to the nurse or doctor caring for you.

What is an appendicectomy?

An appendicectomy is an operation to diagnose and treat acute appendicitis. Acute appendicitis is when your appendix has become inflamed, infected or perforated (ruptured). The appendix is a small, finger-shaped organ protruding from the large intestine (bowel) in the lower right side of your abdomen (tummy).

What happens before my operation?

At the hospital, we will ask you to have a wash and change into a surgical gown. We will give you some compression stockings to wear, to reduce the chance of blood clots in your legs. We may also give you a small blood-thinning injection. The anaesthetist will check your general health and explain more about your general anaesthetic (which puts you to sleep during your surgery). If you would like further information about this, please ask for a copy of our leaflet Having an anaesthetic. You will need to have an empty stomach before the surgery. Your nurse and doctors will tell you when you need to stop eating and drinking. You will also see your surgeon, to explain more about the surgery, and answer any questions you may have. They will ask you to sign a consent form to show that you agree to have the operation. You will be given a copy of this, for your own records.

How is an appendicectomy performed?

Depending on your condition, the operation can be done laparoscopically (through small cuts – also called ‘keyhole surgery’) or as an open procedure. Both are done under general anaesthetic.

In an open procedure, we will make a cut in the lower right hand side of your tummy, where we can locate and remove your appendix. If you have developed an abscess on your appendix, this will also be drained and washed away, and you may have a small drain tube left in for a few days after your surgery.

If the operation is done laparoscopically, we will make several smaller cuts in your tummy and use special instruments to remove the appendix. However, if the appendix has ruptured, the doctors may not be able to perform keyhole surgery and may need to do an open operation or make a bigger cut down the middle of your tummy. Any wounds are closed with stitches.

If your appendix has not ruptured, you will be able to go home the same day, or the day after.
However, if you have a ruptured appendix, you may need to stay in hospital for longer. A more serious complication of this rupture is called **peritonitis**. This is the inflammation of the peritoneum – the layer of tissue that lines the tummy and all the organs within it. Again, this will mean you have to stay longer in hospital.

**What are the risks of the procedure?**

As with any surgery, there are associated risks. The most common risks of appendicectomy are:

- finding that the appendix is normal, or that something else is causing the problems
- bleeding and bruising
- infection in the wound, inside the abdomen or chest
- blood clots in the legs (deep vein thrombosis – DVT) or chest (pulmonary embolism – PE).

Other less common risks are:

- injury to other organs or structures
- hernias (weakness in the surrounding muscle)
- reaction to anaesthetic drugs
- not being able to empty the bladder completely (urinary retention), requiring a temporary catheter
- bloated bowels.

**What are the alternatives?**

It is difficult to be completely certain that someone has appendicitis. The doctors treating you have used their experience to recommend an appendicectomy, as they think appendicitis is a possibility. Alternatives may include repeated assessments and waiting to see what happens, or antibiotics. Someone with appendicitis who is treated with antibiotics is likely to have another attack of appendicitis within a year, and need further hospital treatment (including surgery).

**What happens after the operation?**

After your operation, you will go into the recovery area to be monitored as you wake up from the anaesthetic. Once you are recovered, we will take you back to the ward. We will monitor your blood pressure, pulse and the wound. You can start to drink after the operation, and eat as you feel hungry. You will be able to get out of bed a few hours after your surgery, and the nursing staff will help you the first time you try this. You may feel drowsy for a day or so as the anaesthetic wears off, so you should take it easy and not make any important decisions, sign any legal documents or operate machinery for at least 24 hours after your operation.

**Will it be painful?**

It is normal to have some pain in your tummy and around the wound for several days after your surgery. This can be managed with regular painkillers. Your tummy may feel bloated afterwards, but this will settle in time. If you have had a keyhole procedure, you may experience some pain in your shoulder. This is due to the air inserted along with the instruments, which gets absorbed into the body. Walking around can help this to improve.
You may also notice that you have a sore throat afterwards. This is due to the breathing tube placed in your throat for the general anaesthetic. This pain will go in a day or two.

**When can I go home?**

You can go home once you:
- feel ready
- can eat and drink without feeling sick
- have no signs of infection
- have had your wound checked to make sure it is OK
- can get out of bed and move around
- can manage your pain at home with tablets.

Typically this will be on the day of the surgery or the day after, unless the appendicitis has been severe.

**How do I look after my wound?**

The dressings for your wound are splash-proof, and you can carefully wash or shower, but remove the dressings if they become soaked. Normal healing may involve tingling, numbness and itching of the wound, and a hard lumpy feeling as the new scar tissues form.

Stitches in the skin are usually dissolvable, meaning they do not need to be removed, but your nurse will tell you if this is not the case.

**When will my bowels return to normal?**

You may find that you have either constipation or diarrhoea after your operation; this is very common. It may take some time for your bowels to return to normal, but if you are concerned, please speak to your GP. A mild laxative (in the short term) and a high-fibre diet may help if you feel constipated. Remember to drink plenty of fluids so that you do not become dehydrated.

**When can I return to work?**

You can return to work and normal activities as soon as you feel able to. This will depend on your type of surgery you have had and the type of work that you do (physical work or non-physical work). We generally recommend that you take a couple of weeks off, but you may wish to go back to work sooner if you are in a non-physical job. If your job involves heavy lifting or manual labour, we recommend that you take at least four to six weeks off. Please discuss this with your GP.

**What should I do if I have any problems?**

Please seek medical advice if you:
- experience leakage, redness, increased pain, or other problems with the wounds
- feel unwell and feverish
- have pain in your calves or are short of breath
- experience prolonged vomiting.
If you have any concerns, please call the hospital ward you were on for advice. Your GP and practice nurse will also be able to advise you about this or any other questions you have about your recovery.

It is not usual to have any follow-up after this procedure, unless you have any further issues or complications.

We hope that you have found this leaflet helpful and wish you a speedy recovery.

**Contact us**

If you have any questions or concerns about your appendicectomy, please contact the ward you were discharged from or call the gastrointestinal unit at St Thomas’ Hospital on **020 7188 8866** (Northumberland ward) or **020 7188 8867** (Page ward) Monday to Friday 9am to 5pm.

**Pharmacy Medicines Helpline**

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

**Your comments and concerns**

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS)  
**e:** pals@gstt.nhs.uk

**t:** 020 7188 3514 (complaints)  
**e:** complaints2@gstt.nhs.uk

**Language and accessible support services**

If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815  
**e:** languagesupport@gstt.nhs.uk

**NHS 111**

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

**NHS Choices**

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** www.nhs.uk

**Get involved and have your say: become a member of the Trust**

Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

**t:** 0800 731 0319  
**e:** members@gstt.nhs.uk  
**w:** www.guysandstthomas.nhs.uk/membership

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