

Appendicitis

Welcome to the Southern Adelaide Local Health Network.

This information sheet aims to answer any questions you may have about your child having appendicitis.

What is Appendicitis?

Appendicitis is inflammation of the appendix. The appendix is a thin pouch attached to the large intestine on the right side of the abdomen. It is usually about the size of a finger.

If you have appendicitis, the appendix can become swollen and infected. This can cause it to burst. If this happens, the infection is likely to spread throughout the abdomen, causing serious problems such as peritonitis (infection inside the abdomen) or an abscess around the appendix.

What are the warning signs/symptoms of appendicitis?

Pain is the most common symptom of appendicitis. It often starts near the navel, or belly button, and might come and go for a while. It then usually moves low down to the right in the abdomen (tummy) and becomes more severe and more constant. It usually hurts to walk or cough.

Other common signs and symptoms of appendicitis are:

- fever (high temperature)
- an abdomen which is tender to touch, especially low on the right
- nausea (feeling like throwing up)
- loss of appetite (not feeling like eating)
- vomiting, although usually only once or twice
- diarrhoea or constipation

Young children can find it hard to say where the pain is, and all you may know is that they are sick. If it is appendicitis, usually the pain will only be in the right side of the stomach. Unlike gastro, vomiting or diarrhoea are usually mild with appendicitis.

What causes appendicitis?

Appendicitis can be caused by an infection or a blockage in the appendix. Why this happens is not known, but it may be caused by food or faeces (poo) getting lodged in the appendix. The appendix becomes blocked, then inflamed, then infected. Appendicitis can occur at any age but is most common in children and young adults.

How is appendicitis diagnosed?

The main way a doctor diagnoses appendicitis is by talking about what has happened and examining the person with the pain.

The doctor will ask for a history of your child's symptoms and illness. They will examine your child by checking the site of the pain and pressing on the abdomen.

Sometimes it can be difficult to work out the exact cause of stomach pain as there are many possible reasons. If the doctor is not sure if it is appendicitis, they may keep your child in hospital and watch them to see if their symptoms get worse.

Tests will be performed to help work out what is going on, but these tests are not always helpful or reliable, they don't always give a definite answer.

Your child may need:

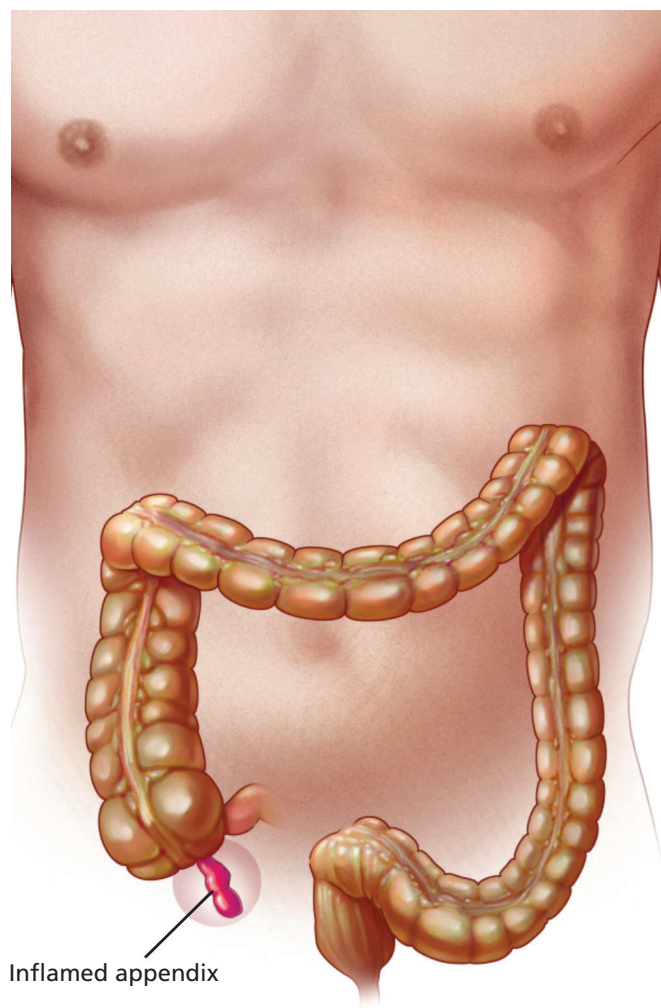
- an ultrasound or X-ray to take pictures of their abdomen.
- a blood test to look for signs of infection or inflammation.

In cases where children are sick and it is not clear why, your doctor may recommend an operation to check the appendix even if they are not certain it is inflamed.

A CT scan is a different type of scan sometimes used to help diagnose appendicitis, however in children **a routine CT scan to diagnose appendicitis is not recommended due to the high exposure to radiation.**

It can be hard to diagnose appendicitis, especially in a young child. Even in adults, it can be hard to tell the difference between appendicitis and conditions like ectopic pregnancies, bowel infections and bowel obstructions. The doctor may need to examine the person with the pain a number of times.

Since appendicitis is potentially life threatening if left untreated, doctors will err on the side of caution and operate, even if there is no firm diagnosis.



How is appendicitis treated?

Conservative management – After looking at all the results and clinical findings the doctors may choose to manage appendicitis in the first instance with intravenous antibiotics.

Simple appendicitis is an operation to remove the inflamed appendix, known as an appendectomy or appendicectomy.

The appendix is not essential for health, and the body functions normally without one.

There are 2 different ways to remove the appendix:

- **Laparoscopic (or keyhole surgery)** — through a tiny telescope. There will be 3 small keyhole cuts of about 1-2cm long each
- Rarely an **open operation** will need to be performed through a **larger incision**

Recovery time from surgery will vary depending on many factors, including the person's general health, the type of surgery, and whether the appendix has burst.

Most people recover without too many troubles.

Sometimes, the wound gets infected, and this will need follow up by a doctor.

Sometimes, the appendix is found to be normal, i.e., not inflamed, after it is removed, and this usually means there is another reason for the symptoms that are like appendicitis. Your doctor may discuss looking for another cause of the problem.

Complex appendicitis

Sometimes antibiotics might be used as well as removal of the appendix. Antibiotics may be used if:

- The surgery is delayed
- If you must travel a long way to have the operation, or
- If there are complicated factors such as an abscess/ collection or mass on the appendix

Your doctor may prescribe antibiotics before surgery to reduce the risk of infection.

After surgery, your doctor may recommend light activity for a few weeks until the surgical wound heals.

Can appendicitis be prevented?

There is no proven way to prevent appendicitis.

Care at home

When your child comes home from hospital, they should:

- Stay home from school for one week and avoid sports for two weeks, but these times will depend on how sick your child has been. Always ask your surgeon if you're not sure.
- Be able to eat and drink as normal.
- Be able to shower and bathe as normal.
- Be in minimal pain. You can give paracetamol or ibuprofen as directed, if your child is in pain. See our fact sheet [Pain relief for children](#).
- Any sutures will be dissolving, and you will be told what to do about any dressings your child has.

Follow-up

There is a small risk of developing an infection or a bowel blockage after having a burst appendix. Contact your GP or take your child to the local emergency department if:

- Your child gets a persistent fever (above 38.5°C)
- The wound starts to look infected (e.g. it looks red and inflamed, has a discharge, or it becomes more painful)
- Your child has increasing pain that is not controlled by paracetamol or ibuprofen.

Key points to remember

- A diagnosis of appendicitis is important because a burst appendix can make a child very sick.
- An appendicectomy is an operation to remove the appendix. The appendix is not useful to the body.
- Your child will be in hospital for one to three days depending on the severity of the appendix infection.
- Once you are home from hospital, contact your surgeon if you think your child is developing an infection.

Sources:

Royal Children's Hospital Melbourne (Appendicitis Factsheet), Sydney Children's Hospital Network (Appendicitis Factsheet), Choosing Wisely Australia (Choosing Wisely recommendations), Cochrane Review (Appendectomy versus antibiotic treatment for acute appendicitis, 2011)
Learn more here about the development and quality assurance of healthdirect content.

For more information

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