

67% of antibiotic-treated appendicitis cases deemed successful

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- Minneci PC, et al. *JAMA*. <https://bit.ly/2QUELRb>.

Roughly 67% of children whose appendicitis was treated with antibiotics did not need surgery within a year, according to a study of 1,068 children ages 7-17 years.

The findings come as about 70,000 children each year undergo an appendectomy, and increasing research indicates nonoperative management of appendicitis is safe and effective.

Researchers studied children with uncomplicated appendicitis at 10 children's hospitals that are part of the Midwest Pediatric Surgery Consortium. About 65% chose laparoscopic surgery, and 35% chose a nonoperative route. The latter consisted of at least 24 hours of intravenous antibiotics and at least one dose of oral antibiotics at the hospital followed by continued oral antibiotics at home for a total of seven days, including those spent in the hospital.

Treatment of about 67% of the children who chose the antibiotics was considered successful, meaning they did not require an appendectomy within a year. In addition, the nonoperative group had an adjusted mean of just under seven disability days compared to almost 11 among the surgery group.

Satisfaction scores were high for both groups, but both the success rate and disability days fell short of expectations. Surgeons had aimed for a nonoperative success rate of at least 70% and expected a difference of at least five disability days. However, authors said patients, families and other clinicians may have a less stringent view of success. In addition, they said decreasing or eliminating the hospital stay for the nonoperative group could improve the benefits.

"Surgeons tend to be passionate about operations, and an appendectomy is a well-tested and trusted procedure," author Katherine J. Deans, M.D., M.H.Sc., FAAP, a member of the AAP Section on Surgery, said in a news release. "However, some patients want to avoid surgery at all costs, and the results of our studies reflect the effectiveness of offering a non-operative management to patients and their families in clinical practice. This allows us to move away from a one-size-fits-all model of appendicitis care and treat each child based on his or her values and preferences."

