

AB173. 37. A retrospective audit of all of the appendectomies done in a calendar year in a peripheral Irish hospital

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Abstract: Acute appendicitis is the most common surgical emergency in A&E. A diagnosis of appendicitis is still clinically based—leading to incorrect diagnoses and unnecessary surgeries in a certain amount of cases. The surgery teams do not know how many of these cases are unnecessary or if there is any correlation between histologically confirmed inflamed appendixes and routine bloods. Imaging is not usually done on suspected appendicitis patients. The hospital theatre books were reviewed to identify every appendectomy that occurred in the calendar year of 2015. Multiple details of each procedure were captured. The bloods and histology associated with every procedure were captured and analysed using an Excel spreadsheet. A total of 254 appendectomies were carried out in 2015.

Of them, 177 were histologically inflamed (including a mucinous neoplasm and neuroendocrine carcinoid tumour). Seventy-four of the appendixes removed were normal. The remaining 3 were classified as: normal (with a faecolith) and no histology was noted for two cases. The neutrophil count was elevated in 144 of the inflamed appendixes and 25 of the non-inflamed appendixes. C-reactive protein (CRP) was elevated in 134 of the inflamed appendixes and 25 of the non-inflamed appendixes. The white blood cell (WBC) was elevated in 130 of the inflamed appendixes and 27 of the non-inflamed appendixes. International figures point to a non-inflamed appendectomy rate of 15%, so this hospital is nearly double that figure at 29%—resulting in significant number of unnecessary surgical procedures for the patient and the hospital. Neutrophil count is the most sensitive blood marker for a histologically inflamed appendix.

Keywords: Appendectomy rate; histology; white blood cell (WBC); C-reactive protein (CRP)

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