Appendicitis and appendectomy

What is an appendix?

The appendix is a small, finger-shaped pouch attached to the large intestine (colon). It is located just past the point where the small intestine joins the large intestine. This is in the lower right side of the abdomen (area below the belly button).

The appendix does not seem to have any use. Children can live a normal life without an appendix with no need for diet, exercise or lifestyle changes.

What is appendicitis?

Appendicitis is an inflammation of the appendix. It is not contagious (does not pass from one person to another).

What causes it?

The causes are not well understood. It may be caused by:

- A blockage, usually from feces (stool).
- An abnormal change in the tissue, such as trauma, scarring or ulceration.
- Infection.

What problems can happen?

Possible problems include:

- Rupture (bursting) of the appendix. This can lead to peritonitis, which is the spread of the infection out into the abdomen. Peritonitis is a medical emergency and can be life threatening.
- Abscess. This happens when bacteria (germs) and pus form near the appendix. This can even happen after the appendix is removed.
- Internal obstruction. This is a blockage caused by a kink in the intestine. This can happen if the appendix bursts.

What are the symptoms of appendicitis?

Your child may have 1 or more of these:

- Pain or tenderness that starts around the belly button. It can get worse, often with movement or coughing. The pain most often settles in the lower right side.
- Does not want to eat or drink like normal.
- Nausea or vomiting (throwing up).
- Constipation or diarrhea (loose stools). Your child may:
  - Have bloating and swelling of the abdomen.
  - Have small stools that have mucus.

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  - Have a feeling that a bowel movement would relieve discomfort.
  - Not be able to pass gas.
- Normal or slightly raised temperature (fever).
- Toddlers may have trouble eating and seem very sleepy.
- The muscles in the abdomen can get very tight, especially when pressing on the area.

What tests could my child have?

Tests that may be helpful to your child's doctor include:

- Blood tests. Blood tests alone cannot confirm appendicitis, but an increase in WBCs (white blood cells) and CRP (C-reactive protein) may lead the doctor to order more tests.
- A urine test.
- X-Ray, ultrasound or CT scan of the abdomen. This may help to show an inflamed appendix.

What is the treatment for acute appendicitis?

Your child will need surgery to remove the appendix. This is called an appendectomy. It can be done 2 ways. Talk with the doctor about what your child needs.

- **Laparoscopy**. The doctor will:
  - Make 3 or 4 small incisions (cuts) in the abdomen.
  - Use a lighted tube with a camera on the end called a laparoscope to check the area.
  - Use special instruments to remove the appendix.
  - Most often allow your child to go home within a day. If your child has an abscess or ruptured appendix, they may need to stay in the hospital longer.
- **Open incision**. The doctor will make a larger incision on the lower right side of the abdomen. If your child has an abscess or peritonitis, the area is "washed" well after the appendix is removed.

Your child will get anesthesia during surgery, so they will be in a deep sleep and not feel pain.

Other treatments may include:

- Antibiotics (medicines to kill germs). Your child may get these through an I.V. or swallow them.
- I.V. fluids.
- Drain tubes left in place after surgery to drain fluids from the abdomen.
- Medicines for pain.
- Getting out of bed as soon as your child is able. Walking helps the lungs stay clear and helps get rid of extra gas in the abdomen.

What is the treatment for a ruptured appendix?

A ruptured appendix most often requires more treatment and a longer hospital stay.

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Your child may need:
- Antibiotics for a longer time.
- A nasogastric (NG) tube attached to suction.
  - An NG tube is a long, soft, flexible tube that goes up the nose and then down the back of the throat and into the stomach.
  - It is most often kept in place for several days until normal bowel function returns.

What is the treatment for an abscess?

Sometimes children are sent home on antibiotics to clear up the infection before surgery. A drainage tube may be placed through the skin into the abscess and left in place while the infection clears.

When can my child return to daycare, school or work?

The doctor will tell you when your child can return to normal activities. Your child may need to:
- Rest at home for 1 to 2 weeks.
- Keep from doing strenuous activities, such as gym class, sports or heavy lifting, for about 1 month.

When should I call the doctor?

Call the doctor **right away** if your child has any of these:
- Fever higher than 101°F
- Signs of infection in the incision area, such as:
  - Redness
  - Swelling
  - Increased drainage or bleeding
  - Increased pain

Also call the doctor if:
- Your child's pain is not helped by their pain medicine.
- You have questions or concerns about how your child looks or feels.

This teaching sheet contains general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child.

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