

ADVANCES IN SURGERY

Can Surgery for Appendicitis Be Performed as an Outpatient Procedure?

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Keywords

Appendicitis
 Outpatient
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Key points

- Appendicitis represents the most common surgical emergency.
- Surgical treatment has evolved in the past 2 decades from an open to a laparoscopic procedure.
- Enhanced recovery after surgery pathways have been developed for many elective operations, but this approach has not been embraced in acute care surgery.
- Outpatient laparoscopic appendectomy can be performed with low morbidity, few readmissions, and acceptable patient satisfaction.

BACKGROUND

Surgical inspiration comes from a variety of sources. In 2008, the young man pictured (Fig. 1), my son, developed acute appendicitis as a sophomore in college. He underwent a successful laparoscopic appendectomy and was in his hospital room by the time his mother and I had traveled to his college town to see him. As visiting hours expired, we left the hospital with plans to pick him up the next day. When we saw him the following morning, I asked, "Did everything go okay last night?" He replied, "Yes, but I wish I had gone home last night with you and mom." This experience got me thinking... "Why do we admit patients after laparoscopic appendectomy?" The typical

The author has nothing to disclose.

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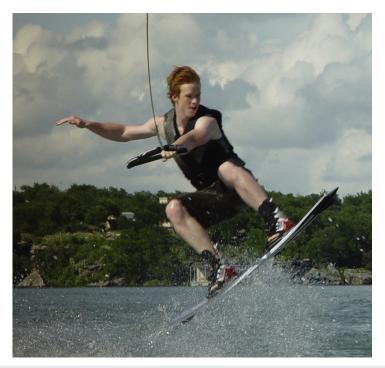


Fig. 1. Typical adult patient with appendicitis: young, healthy, and motivated to return to normal activities.

patient with appendicitis is a young adult, with few or no comorbidities, who is motivated to get out of the hospital as quickly as possible. Outpatient laparoscopic cholecystectomy is already considered standard of care. And yet, we still admit patients after laparoscopic appendectomy for uncomplicated appendicitis. Is there a reason for this practice?

As a first step to address this question, it was appropriate to document what was our existing practice pattern in 2009. A retrospective review of laparoscopic appendectomy from our institution reflected that 35% of our patients had their surgery performed on an outpatient basis [1]. Another 60% of patients were hospitalized for 1 day and a handful of patients admitted for 2 to 5 days postoperative. In retrospect, it was difficult to determine why the patients that were hospitalized for 1 day required admission. We questioned whether outpatient management would increase with a predefined protocol applied to this patient group. The demographics of appendicitis are as follows:

- Mean patient age in early 20s.
- Male predominance.
- A 7% lifetime risk.

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