

Division of Pediatric General Surgery

Appendicitis



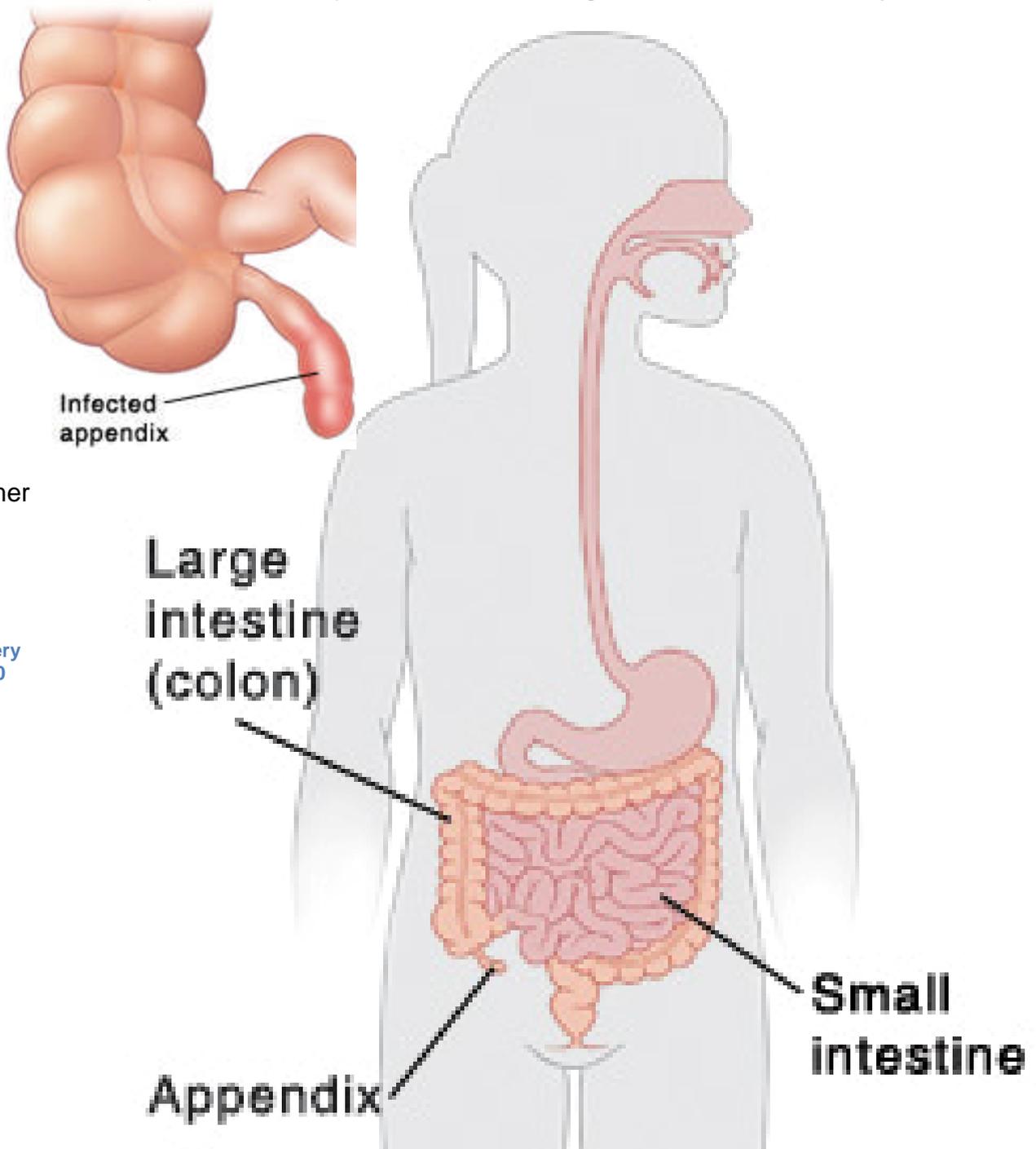
Dr. Angela Hanna

The appendix is a thin tube of intestinal tissue that is attached to the start of the large intestine (colon) in the right lower part of the abdomen. There are many theories that exist about the function of the appendix, but the overall, the function is unknown.

Appendicitis is an infection and/or inflammation of the appendix due to blockage. It is usually caused by food and/or stool becoming trapped within the appendix, but sometimes is due to lymphatic swelling within the wall of the appendix. When it becomes infected, the ultimate goal is to surgically remove the appendix before it bursts or perforates and spreads infection throughout the abdominal cavity.



Dr. Rob Weinsheimer



Pediatric General Surgery
1101 Madison, Suite 800
Seattle, WA 98104
206-215-2700

What are the symptoms of appendicitis?

The most common symptom is abdominal pain. Initially, children usually complain of pain around their umbilicus (belly button) and do not want to eat. The pain then gradually moves to the right lower part of the abdomen. Movement tends to make the pain worse. Your child may be nauseous, vomit and have diarrhea. Your child may also have a low grade fever. If the appendix perforates, your child may have a high fever due to the spread of infection.

How is appendicitis diagnosed?

If your child is having the symptoms described above and you are concerned it may be appendicitis you should bring them to the emergency room or to see their doctor. The doctors will do a series of tests to help determine if your child has appendicitis. This will include a physical exam where the doctor looks at and feels your child's belly, and possibly blood tests and/or imaging such as an ultrasound or a CT scan. During this evaluation, your child may not be able to eat or drink anything, but the nurses and doctors will do their best to make sure your child is as comfortable as possible.

How is appendicitis treated?

If your child has appendicitis, and the doctors do not believe the appendix has burst, it is very important that he or she has a surgery to remove the appendix. This surgery is called an appendectomy and takes about an hour. Your child will need to have an IV and will be given a medicine to make him or her go to sleep and feel no pain during the surgery. The appendix will likely be removed using a camera (laparoscope), however it could also be removed through a small incision on the abdomen. If your child's appendix has NOT burst, he or she typically will be able to go home 1 day following surgery.

If the appendix has burst or ruptured, he or she will need to be admitted to the hospital so antibiotics can be given through an IV. The length of admission varies but you can expect your child to be in the hospital getting the medication for several days. After you go home, your child may continue to take an antibiotic(s), and you will follow up with the surgeon in the clinic. Some cases of ruptured appendicitis are treated with IV antibiotics initially without surgery. About 8 weeks later, your child may then have an appendectomy to prevent further appendicitis.

Post surgical care:

Care of the surgical site

There will be a gauze dressing over your child's incision. You can take this dressing off 2 days after surgery. Under the gauze dressing, the incisions will be covered with steri-strips (little paper bandages). Your child should wait 2 days before showering and 1 week before swimming or taking a bath. Eventually the steri-strips will fall off on their own. They can be removed after 2 weeks if still present.

Please call our office following surgery if you notice any signs or symptoms of infection or other complication:

- Fever greater than 101 degrees Fahrenheit
- Redness, swelling, drainage and/or persistent pain at the incision site
- Pain not relieved by pain medicine
- Vomiting

What should my child eat after surgery?

Your child should drink plenty of fluids and eat a light diet the evening after surgery. In the days following the surgery he or she can begin to resume a normal diet as tolerated, but we recommended starting with bland foods and working up from there.

How can I keep my child comfortable after surgery?

Following surgery, pain and discomfort is normal. Some children require more pain medication than others. Painkillers such as Tylenol and/or Ibuprofen (depending on your child's age) can be given around the clock for the first 24-48 hours and as needed after that. Sometimes, a stronger pain medication is prescribed. This prescription medication should be used for severe breakthrough pain that is not covered by the other pain medicines (Tylenol or ibuprofen). Consult pharmacist when picking up prescription medication for proper instructions and side effects.

Will my child have any activity restrictions following surgery?

In order to help with the healing process, it is important to encourage your child to be up and moving around the day following the surgery. However, he or she should avoid rough play, contact sports, heavy lifting, bicycle riding, playground/climbing equipment and any other activity that could strain the stomach muscles for 2-4 weeks. The basic rule is to avoid activities in which your child might ignore pain from the surgery.

School age children can return to school when they are comfortable. School excuse and PE excuse notes are available upon request.

Is follow up with the surgeon necessary?

The surgeon will see your child 1-4 weeks following surgery in clinic to be sure the surgical site is healing correctly and to address any concerns.

Notes
