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Open appendicectomy under spinal anaesthesia – a valuable alternative during COVID-19

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Introduction: Concerns relating to COVID-19 and general anaesthesia prompted our department to consider that open appendicectomy under spinal anaesthesia (SA) avoids aerosolisation from intubation and laparoscopy. Whilst common in developing nations, it is unusual in the United Kingdom (UK). We present the first UK case series and discuss its potential role during and after this pandemic.

Methods: We prospectively studied patients with appendicitis at a British district general hospital who were unsuitable for conservative management and consequently underwent open appendicectomy under SA. We also reviewed patient satisfaction after 30 days. This ran for 5 weeks from 25th March 2020 until the surgical department reverted to laparoscopic appendicectomy as the standard of care. Main outcomes were 30-day complication rates and patient satisfaction.

Results: None of the included seven patients were COVID positive. The majority (4/7) had complicated appendicitis. There were no major adverse (Clavien-Dindo grade III to V) post-operative events. Two patients suffered minor post-operative complications. Two experienced intra-operative pain. Mean operative time was 44 minutes. Median length of stay and return to activity was 1 and 14 days respectively. Although four stated preference in hindsight for general anaesthesia (GA), the majority (5/7) were satisfied with the operative experience under SA.

Discussion: Although contraindications, risk of pain, and specific complications may be limiting, our series demonstrates open appendicectomy under SA to be safe, feasible and acceptable in the UK. The technique could be a valuable contingency for COVID suspected cases and patients with high-risk respiratory disease.