

816 Managing Acute Appendicitis During the First Wave of the COVID-19 Pandemic: A Single-Centre Retrospective Study

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Introduction: The COVID-19 pandemic provoked a change to normal surgical practice and led to a higher proportion of acute appendicitis (AA) patients being treated conservatively with antibiotics. We aim to analyse patients presenting with AA during the first wave of the pandemic, comparing surgically and conservatively managed patients.

Method: All patients presenting to our centre with AA between March and July 2020 were included. Six-month follow-up data was collected retrospectively using electronic records. Patients were categorised into surgically and conservatively managed groups. The primary outcome was the complication rate (post-operative complications vs failure of antibiotic treatment) and the secondary outcome was length of hospital stay.

Results: Fifty-seven patients (n=57) were admitted with AA, 45.6% (n=26) managed conservatively compared to 54.4% (n=31) treated surgically. Higher complication rates were observed amongst the conservatively managed group, although not statistically significant (16% vs 35%; p=0.131). There was no significant difference in length of hospital stay observed between the two groups (surgical: median, 2; interquartile range, 2-3 vs conservative: median, 3; interquartile range, 2-4). White cell count (WCC) and Alvarado score were higher on admission in the surgical group with statistical significance (p=0.012 and p=0.028 respectively).

Conclusions: Stratification criteria, such as Alvarado score and WCC may identify patients more suitable for conservative management. Longer term follow-up will be carried out, which may alter complication rates in either group. We suggest all patients treated conservatively should undergo computerised tomography (CT) to exclude complicated appendicitis. Further UK-based studies will add to the evidence-base surrounding management of AA during the COVID-19 pandemic.