(39.6%) had a CT in 2019 versus 70 (56%) in 2020. The median LOS was 4 days (interquartile range (IQR) 3 to 6 days) in 2019 and 3 days (IQR 2 to 5 days) in 2020 (p = 0.03). Two patients in each year who received NOM had treatment failure (14.3% in 2019 and 6.5% in 2020). Three patients in 2019 who had OM had treatment failure (2.2%). Of 95 patients tested for COVID-19 all but one was negative.

Conclusion: During the COVID-19 pandemic there was no observed increase in severity of AA, patients had a shorter LOS and were more likely to have imaging. NOM proportionally increased with no observed change in outcomes.

## P61

Impact of the COVID-19 pandemic on the presentation and management of acute appendicitis: a single-centre analysis

H Pringle, U Donigiewicz, M Bennett, GF Fowler, E Walker, S Ball, S Narang, RM Bethune

Royal Devon & Exeter Hospital

Corresponding Author: Dr. Heather Pringle (heather.pringle@nhs.net)

Introduction: The COVID-19 pandemic has influenced the delivery of healthcare. In accordance with the UK Joint Royal Colleges' advice the management of acute appendicitis (AA) changed with greater consideration for non-operative management (NOM) or open appendicectomy where operative management (OM) s sought. Our aim is to share our experience of the presentation, management and outcomes for patients presenting to our Trust with AA to guide care for future viral pandemics.

Methods: This single-centre retrospective cohort study included patients diagnosed with AA in March to July 2019 compared with March to July 2020. Medical records were used to evaluate demographics, inflammatory markers, imaging, severity, management, histology, length of stay (LOS), complications and 90-day outcomes.

Results: There were 149 and 125 patients in the 2019 and 2020 cohort, respectively. 14 patients (9.4%) had NOM in 2019 versus 31 patients (24.8%) in 2020 (p = 0.001). In the 2019 OM group 125 patients (92.6%) had laparoscopic appendicectomy versus 69 (73.4%) in 2020. 59 patients