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Variation in anti-microbial use and complications post emergency appendicectomy in Australia: Do we follow recommended guidelines?

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Aim: The primary outcome is to investigate surgeons' compliance to antibiotics guidelines for management of appendicitis in Australia peri and postoperatively, with the secondary outcome looking at predictors of post-operative complication; Surgical Site Infection (SSI) and intra-abdominal abscess in 30 days.

Methodology: A multicenter, prospective, observational study was conducted in a period of 2 months between June and October 2016. Databases with prefilled variables are completed by each local principal investigator with protocol guidance. Patients who underwent laparoscopy with the intention of appendicectomy were recruited in the study.

Results: A total of 1189 patients were recruited. Therapeutic guidelines antibiotic version 15 (Australian Clinical Practice Guidelines, 2014) is used to compare compliance. Guidelines endorses all patients who had received antibiotics perioperatively; 1081 (92.1%) received antibiotics in this study. The rate of perioperative antibiotic use increases with the severity of appendicitis. Highest use was in the gangrenous group, 81 (98.1%) followed by complicated, 191 (93.2%) and non-appendicitis, 156 (85.7%). 593 (51.0%) and 379 (32.6%) patients received postoperative Intravenous (IV) and oral antibiotics respectively. Following simple appendicectomy, only 391 (56.6%) patients did not receive postoperative antibiotics as per guidelines. However, in gangrenous and complicated appendicitis, it is reassuring to see 89 (98.9%) and 198 (97.1%) patients received antibiotics postoperatively. Aboriginal and Torres Strait Islander (5.5x) and laparoscopy converted open appendicectomy (9.5x) increases the odds of SSI. This is also statistically significant post multivariable logistic analysis (p<0.05). Complicated appendicitis, operated by senior surgeon and received IV or oral antibiotics postoperatively increases the odds of intra-abdominal abscess.

Conclusion: We recommend more awareness and implementation are required for antibiotics prescription guidelines for optimal management of appendicitis in Australia.

Biography

Da Wei Thong has completed his Medical degree (MBBS) at Monash University, Australia in 2013. He is currently pursuing a Master (MSc) in Surgical Sciences with University of Edinburgh, UK and is in his final year of study. He is currently working as an unaccredited Surgical Registrar at Gold Coast Health, Australia. His main clinical interests lay in general surgery. He is affiliated with Griffith University as a Lecturer and is an active Advocate of surgical research works.

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