

Laparoscopic versus Open Appendectomy: Where Are We Now?

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Abstract

Purpose: Although the advantages of laparoscopic procedures has been well studied over the last two decade, laparoscopic appendectomy could not to be a standard therapy due to some disadvantages such as longer operative time and higher cost. The objective of our study is to re-evaluate the outcomes of laparoscopic versus open appendectomy with current data.

Methods: Between January 2012 and July 2012, the data of the patients who had appendectomy were recorded prospectively. Patients' demographics, duration of procedure, length of hospital stay, need of analgesics, postoperative visual analogue scale scores and morbidity were assessed.

Results: Of 241 patients, 120 (49.8%) underwent open and 121(50.2%) laparoscopic appendectomy. The operating time was similar for both groups ($p=0.855$). The visual analog scale scores of 1st ($p=0.001$), 6th ($p=0.001$) and 12th ($p=0.028$) hours were higher in open the appendectomy group. The total need of analgesics significantly was higher in open group ($p=0.001$). There was no statistical difference in terms of total morbidity rate between open and laparoscopic appendectomy groups ($p=0.617$).

Conclusion: Two operative techniques are similar in terms of length of hospital stay, operative time, and postoperative complications. Laparoscopic appendectomy reduces the need for analgesics and visual analog scale scores; therefore, it should be considered as the gold standard for surgical treatment of acute appendicitis.

Key words: appendicitis, appendectomy, laparoscopic surgical procedure, abdominal abscess, surgical wound infection

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