More and more we are hearing about pediatric surgeons opting to consider non-operative management of uncomplicated appendicitis—meaning children are treated with antibiotics and observed rather than undergo the classic operation. So is this a safer way to go? Does it reduce length of stay or reduce costs but improve outcomes? Bachur et al. (10.1542/peds.2017-0048) have studied outcome metrics associated with nonoperative appendicitis in a study over the period 2010-2016 among 4190 children in 45 US pediatric hospitals and share their results when compared with almost 61,500 who were operated on for appendicitis during that same time interval in an interesting study being early released this week. The authors looked at number of ED visits, hospitalizations, frequency of subsequent imaging and whether surgical appendectomy eventually needed to be performed. While the data the authors publish show an uptick in the prevalence of the non-operative approach over the past six years, the outcome measures are nothing to brag about—or at least in this study with more imaging, ED visits, and hospitalizations needed, along with almost half the nonoperative group needing an appendectomy after a non-operative approach was studied.

So should we give up on considering non-operative management of appendicitis after reading this study despite the increase in its use? To help us better understand the limitations of this study and point us in the direction of better prospective randomized trials of conventional appendectomy versus non-operative management of appendicitis, we asked pediatric surgeon Dr. Charles Snyder to prep and drape a commentary (10.1542/peds.2017-1232) in the usual topical fashion—and it's a good one for you to consider as a companion to this timely study.

Are your patients receiving non-operative management of their appendicitis with good results or are you finding the same issues that the Bachur et al. note in this new study? We welcome your comments on this issue by responding to this blog, posting a comment with the article on our website, or simply adding your opinion via our Facebook or Twitter sites.