

A delay in diagnosis and late management of appendicitis with appendectomy is still high with subsequent some serious sequelae. This study is to identify and prevent a causes of delay in diagnosis of appendicitis. A prospective cross section study includes 308 appendectomies performed in a Hilla teaching hospital from January 2013 to July 2015 by same surgical team; 143 (46%) male and 165 (54%) female. Delayed diagnoses was considered when the duration of pain was more than 48 hours, or operative finding show obvious features of delay, like perforation, gangrenous appendix, abscess collection or mass formation. Average duration of symptoms for delayed patients was 96 hours and for early diagnosed was 29 hours, Reasons for delay were sought and divided into two groups; the first is patient behavioral reason, and the second is medical assessment reason. Twenty one percent of appendectomised patients show delayed management despite more than 48 hours abdominal pain (3-10 days, average 4 days), 69% of them was male, and, 31% female. Average duration of hospitalization in a delayed cases was 3.5 days, while average duration of admission for early treated cases was 1.3 day. Mortality rate was zero.

As a reason for delay in diagnosis; patient assessment was the main reason for delay diagnosis (44 patients, 68%); while patient behavior cause was 32% (21 patients). The patient assessment is the main cause of delay in diagnosis and should be improved by examining patients with abdominal pain by expert surgical team considering atypical presentation with proper follow up and investigations. Quality improving program is advised to reduce missed diagnosis of appendicitis.