Reply to letter to the editor concerning: Interval appendectomy in children clinical outcomes, financial costs and patient benefits. David Fawkner-Corbett, Wajid B Jawaid, Jo McPartland, Paul D Losty. *Pediatr Surg Int* (2014) 30:743–746

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We wish to thank Mr. Anies Mahomed and colleagues from Brighton, UK for sharing a keen interest(s) in our paper titled—Interval appendectomy in children clinical outcomes, financial costs and patient benefits, David Fawkner-Corbett, Wajid B. Jawaid, Jo McPartland, Paul D. Losty. *Pediatr Surg Int* (2014) 30:743–746.

We take a very different view from the Brighton group on the clinical need for interval appendicectomy—a much debated issue amongst paediatric surgeons.

To this end we would once again encourage the authors and others interested to more carefully scrutinize the manuscript and its key message(s).

The manuscript from Liverpool recorded an almost negligible complication rate—one single wound infection in a total series of 69 children having interval operations with specifically $N = 35$ having laparoscopy. We reported a difference in outcome when comparing hospital stay of open vs laparoscopic approaches in a children's teaching hospital fully engaged with all surgical technical approaches to appendectomy. Financial costs (£ sterling) referred

to total charges as defined by UK HRG tariff metrics—notably operating theatre, kit, antibiotics, fluids, etc. and hospital bed stay.

Interval operations are indeed permissible as day case surgeries in many centres worldwide and not unique to Brighton! However surgeons must be cognizant of the very small risk of children developing recurrent appendicitis which was 12 % at our centre whilst awaiting future possible elective operation(s). The Liverpool paper additionally provides a thorough literature review quoting a 1:5 children 'at risk' metric for recurrent appendicitis—see Discussion section.

So what would you want for your child or a relative or someone you know? A surgeon citing the benefits of interval appendicectomy who is keen to take out the laparoscope or a well informed surgeon telling a parent(s) this may be a 'non essential operation' and letting the parents decide....

The CHINA study of which we are collaborating partner centre will add further to the debate....

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