

Patient belief about success of antibiotics tied to appendicitis outcomes

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Positive patient beliefs about the likely success of antibiotics for

appendicitis are associated with a lower risk for appendectomy, according to research published online Oct. 5 in *JAMA Surgery*.

David R. Flum, M.D., from the University of Washington in Seattle, and colleagues conducted a secondary analysis of the Comparison of Outcomes of Antibiotic Drugs and Appendectomy randomized clinical trial (425 participants) to understand how patients' beliefs about treatment success are associated with outcomes.

The researchers report that baseline surveys of those randomly assigned to antibiotic treatment show that 22 percent of participants had an unsuccessful/unsure response, 51 percent had an intermediate response, and 27 percent had a completely successful response. Those who believed antibiotics could be completely successful had a lower risk for [appendectomy](#) (adjusted risk difference [aRD], compared with the unsuccessful/unsure group, -13.49 ; 95 percent confidence interval [CI], -24.57 to -2.40).

Comparing those with intermediate versus unsuccessful/unsure beliefs, the aRD was -5.68 (95 percent CI, -16.57 to 5.20). Those with intermediate beliefs had a lower risk for persistent signs and symptoms than the unsuccessful/unsure group (aRD, -15.72 ; 95 percent CI, -29.71 to -1.72), with directionally similar results for the completely successful group (aRD, -15.14 ; 95 percent CI, -30.56 to 0.28).

"Understanding patients' beliefs about [treatment success](#) when making decisions about treatment for [appendicitis](#) may be important," the authors write. "Pathways relating beliefs to outcomes and the potential modifiability of beliefs to improve outcomes merit further investigation."

More information: CODA Collaborative, Association of Patient Belief About Success of Antibiotics for Appendicitis and Outcomes,

JAMA Surgery (2022). [DOI: 10.1001/jamasurg.2022.4765](https://doi.org/10.1001/jamasurg.2022.4765)

John C. Alverdy, Association Does Not Equal Causation—Does Thinking You Are Better Make You Better?, *JAMA Surgery* (2022). [DOI: 10.1001/jamasurg.2022.4781](https://doi.org/10.1001/jamasurg.2022.4781)

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