RCT/Appendicectomy/UC/Induction

Multicentre, open-label, international, randomised controlled superiority trial.

Patients with ulcerative colitis who were in remission but had been treated for disease relapse within the last 12 months were randomly assigned to undergo appendicectomy plus ocntinued maintenance medical therapy or continue maintenance therapy alone.

Primary endpoint: Proportion of disease relapse within 1 year

Results: N=201

- One year relapse rate was 36% appendicectomy vs 56% controls, p=0.005. Adjusted p=0.002
- Adverse events were similar among groups 11% vs 10%

Conclusion:

Appendicectomy is superior to standard medical therapy alone in maintaining remission in patients with ulcerative colitis.

Appendicectomy plus standard medical therapy versus standard medical therapy alone for maintenance of remission in ulcerative colitis (ACCURE): a pragmatic, open-label, international, randomised trial

One year relapse rate



