

**Table 2. Characteristics of includes studies – Postoperatieve antibioticaduur bij acute appendicitis**

Study	Participants	Comparison	Follow-up	Outcome measures	Comments	Risk of bias (per outcome measure)*
<i>Individual studies</i>						
De Wijkerslooth, 2023 (APPIC trial)	<p>N at baseline</p> <p>Intervention: 502</p> <p>Control: 503</p> <p>Age (mean, range)</p> <p>Intervention: 51 years (31-62)</p> <p>Control: 52 years (30-64)</p> <p>Sex (male/ female)</p> <p>Intervention: 285/217</p> <p>Control: 286/217</p> <p>Duration of symptoms</p> <p>Intervention: 2.0 days (1.0-3.0)</p> <p>Control: 2.0 days (1.0-2.8)</p>	<p>Intervention:</p> <p>2 days of postoperative antibiotics after appendectomy</p> <p>Control:</p> <p>5 days of postoperative antibiotics after appendectomy</p>	90 days after appendectomy	<p>Morbidity:</p> <p>Intra-abdominal abscess,</p> <p>Surgical site infection</p> <p>Mortality</p> <p>Any complication</p> <p>Re-interventions</p> <p>Hospital re-admission</p> <p>Total length of stay</p>	<p>Funding: The Netherlands Organization for Health Research and Development</p> <p>Conflicts of interest: no competing interests declared</p>	Some concerns (loss to follow-up, other bias)

	Intravenous antibiotics in emergency department or ward  Intervention: 150 (30%)  Control: 151 (30%)					
De Wijkerslooth, 2024 (APPIC trial)	N at baseline  Intervention: 502  Control: 503  Age (mean, range)  Intervention: 51 years (31-62)  Control: 52 years (30-64)  Sex (male/ female)  Intervention: 285/217  Control: 286/217  Duration of symptoms  Intervention: 2.0 days (1.0-3.0)  Control: 2.0 days (1.0-2.8)	Intervention:  2 days of postoperative antibiotics after appendectomy  Control:  5 days of postoperative antibiotics after appendectomy	90 days after appendectomy	Overall societal costs  Direct health care costs	Funding: The Netherlands Organization for Health Research and Development  Conflicts of interest: no competing interests declared	Some concerns (loss to follow-up, other bias)

	Intravenous antibiotics in emergency department or ward  Intervention: 150 (30%)  Control: 151 (30%)					
Saar, 2019	N at baseline  Intervention: 39  Control: 41  Age (mean, SD)  Intervention: 44.2 ± 15.2 years  Control: 45.8 ± 15.3 years  Sex (male)  Intervention: 56.4%  Control: 63.4%  Time from onset of symptoms to surgery:  Intervention: 43.2 ± 31.2 hours  Control: 48.4 ± 44.3 hours	Intervention: Short antibiotic therapy (<24h)  Control: Extended antibiotic therapy (>24h)	30 days (follow-up phone call)	Hospital length of stay  Morbidity:  Superficial/deel surgical site infection  Organ/space surgical site infection  Any Clavien-Dindo complication  Postoperative ileus  Readmitted patients  Antimicrobial therapy	The authors declare no conflicts of interest.	Some concerns (loss to follow-up, other bias)

	Average length of antibiotic treatment: Intervention: <24 hours Control: 6 ± 3 days			Percutaneous drainage + antimicrobial therapy		
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*\*For further details, see risk of bias table in the appendix*