

Find out more about Gallbladder Surgery

If you are considering Gallbladder Surgery we would like you to be as well informed as possible.

What are the symptoms and complications?

Biliary colic: When gallstones turn symptomatic, they can cause recurrent pain on the right side of upper abdomen under ribs. Typically, the pain from gallstones last for half an hour to few hours and travels to the back.

When this pain is associated with fever it indicates gallbladder infection (acute cholecystitis). In most cases gallstones dislodge temporarily and inflammation/infection settles with non-surgical treatment. In some cases it can progress to more severe infection leading to pus in the gallbladder (empyema of gall bladder). In a small proportion of cases gallstones can migrate into the common bile duct, causing obstructive jaundice (yellowing of the skin and eyes). Sometimes impacted gallstones in the bile duct can irritate the pancreas and cause acute pancreatitis. Obstructive jaundice and acute pancreatitis, when untreated, can lead to serious complications.

Very rarely, due to recurrent and chronic infection of the gallbladder, a false passage with surrounding structures such as the large bowel (colon) and the small bowel (duodenum) can be created. This condition is called fistula (cholecysto-enteric fistula).

However, some gallstones may not cause any symptoms; these are called silent gallstones.

How are the gallstones diagnosed?

Ultrasound scan: A simple, painless test. This test is performed by a specialist.

Computerised Tomography Scan (CT scan): This is a sophisticated x-ray machine which takes several pictures in a short period. A CT scan will be requested to assess gallstone complications and also to detect other problems. This does not involve anaesthesia. You should inform the x-ray technicians if you have any allergies.

Magnetic Resonance Imaging (MRI scan): Uses radio waves and magnets to produce detailed pictures of your body. Some may require MRI scan to detect stones in the bile duct or complications from gallstones. You should inform your surgeon if you suffer from claustrophobia or you have any metal work inside your body.

How are the gallstones treated?

Removal of gall bladder is the standard treatment for patients with symptomatic gallstone disease.

A person who is not fit for general anaesthesia may be offered non-surgical treatment. Generally this non-surgical approach is a good option with short term benefits in this small proportion of patients.

Gallbladder surgery is one of the most common procedures carried out by general surgeons in the UK. Removal of gallbladder is called cholecystectomy.

Two types of cholecystectomy

Laparoscopic cholecystectomy: Performed under general anaesthesia. Your surgeon will make 3-4 small incisions:

One below the belly button and the remaining incisions under the ribs on the right hand side. Your surgeon will inflate your abdomen with carbon dioxide in order to carry out the procedure. A Laparoscope (camera system), connected to a monitor, is introduced into the abdomen. While watching the inside of your abdomen on the monitor, your surgeon will carefully separate the gallbladder from the bile duct, the liver and surrounding structures. Your surgeon may decide to take an x-ray of the bile ducts to ensure none of the gallstones have moved into the bile duct. In our practice 99% of gallbladder surgery are carried out using this technique.

Open cholecystectomy: Performed when the gallbladder is severely infected, inflamed or scarred from previous operations. Sometimes a decision is made to convert to open surgery during laparoscopic cholecystectomy in order to carry out a safer surgery and to prevent serious complications. Occasionally, due to various reasons your surgeon may decide to carry out an open cholecystectomy from the beginning. If this occurs your hospital stay will be slightly prolonged.

What are the complications from cholecystectomy?

Both laparoscopic and open cholecystectomy are safe procedures. The most common complication is wound infection, which can be treated with antibiotics. Rare complications include internal bleeding, bile duct injury and bile leakage. These rare complications may require another procedure or surgery.

What to expect after surgery

It doesn't take long to recover from laparoscopic cholecystectomy. You may experience shoulder tip pain after laparoscopic surgery, it is due to irritation of the diaphragm by carbon dioxide. Most people can leave hospital the same day or the next morning. You can get back to normal activities within two weeks of surgery and it should be safe to do strenuous exercise after a month. We advise you to avoid driving for two weeks or until you are able to apply emergency break without any undue pain.

It takes slightly longer to recover from an open cholecystectomy. It may be three to five days before you can leave hospital and it could be four to six weeks before you return to normal activities.

Can I live without the gallbladder?

One can live without the gallbladder safely. However, very rarely, some people can develop increased bowel frequency. As this is a non-specific symptom and can be associated with other large bowel problems, you should seek medical advice.

What is a Gallbladder?

The Gallbladder is a pear shaped sac situated under the liver on right side of upper abdomen. The gallbladder stores bile, secreted by the liver, and releases it when stimulated by meals. Bile breaks down fat and helps in its digestion.

Who develops gallstones?

Gallstones are made of cholesterol and are formed when cholesterol concentration in bile is increased.

You are more likely to develop gallstones if you are:

- Overweight or obese
- Over 40 years : More common after 40 years and risk increases with age
- Female: Gallstones are three times more common in women than men.
- Fertile: If you are mother or in the child bearing age. This may be due to hormonal influence on cholesterol concentration in bile.
- Rapid weight loss and prolonged fasting
- Certain intestinal diseases such as crohn's disease.

We're here to help with any questions you have about any of the procedures we offer.

To find out more about Nu-life Surgery please either:

- Call us on 01483 724833
- Send an email to enquiries.nulifesurgery@gmail.com
- Fill out our general enquiry form
- Make a consultation enquiry