

Gallbladder Disease

What is gallbladder disease?

The gallbladder is a small pear-shaped organ under the liver. After the liver makes 3-5 cups of bile a day, it is then stored in the gallbladder until food is eaten. Then the gallbladder pushes bile through the cystic duct and into the small intestine to help digestion. Common diseases of the gallbladder include:

(1) *Cholecystitis is inflammation of the gallbladder which can happen suddenly or over a longer period of time. (2) Cholelithiasis is the formation of gallstones within the gallbladder while choledocholithiasis is a gallstone in the common bile duct. Gallstones in the ducts can block the flow of bile and cause swelling of the gallbladder. (3) Biliary dyskinesia is a condition where the gallbladder does not work properly, causing the patient pain, nausea and the inability to tolerate certain foods when eaten.*

Who is at greatest risk for developing gallbladder disease?

Gallstones are more common in people of Native American descent, ovulating women in their forties, and people having a family history of gallbladder disease, are overweight, do not exercise regularly, lose weight rapidly or use estrogen to manage menopause.*

What are the symptoms of gallbladder disease?

The most common symptoms of gallbladder disease are sharp pain on the right side of the abdomen, nausea, vomiting, bloating and low fever. Gallbladder pain or biliary colic is usually temporary. It starts in the middle or right side of the abdomen and can last from 30 minutes to 24 hours. The pain may occur after eating a fatty meal. Acute cholecystitis pain lasts longer than 6 hours with abdominal tenderness and fever.

What tests will I need?

Gallbladder disease is suspected by the classic symptoms and the doctor's physical examination. Tests that help in the diagnosis include: abdominal ultrasound, Complete Blood Count (CBC), HIDA scan and Magnetic Resonance Cholangiopancreatography.

What procedures will my general surgeon recommend?

Your general surgeon may recommend "watchful waiting." If gallstones are seen on your ultrasound but you do not have symptoms, your doctor may monitor you. Surgery is the recommended treatment for gallbladder pain from gallstones, and it is the preferred treatment for acute cholecystitis.

Laparoscopic Cholecystectomy- A general surgeon may recommend that you have a surgical procedure called a laparoscopic cholecystectomy (removal of gallbladder). This technique is the most common for cholecystectomy. The surgeon will make 4 small incisions in the abdomen. A port is inserted into one of the incisions to allow carbon dioxide gas to enter and inflate the abdomen allowing the surgeon to see the gallbladder more easily. A laparoscope (fiber optic camera) is then inserted through another incision so the surgeon can see inside the abdomen, while surgical instruments are placed into the other small openings to remove the gallbladder and clamp off any ducts. Finally, the incisions are closed with sutures and steri-strips. Generally, the procedure takes about an hour. This method is minimally-invasive and usually requires less recovery time.

Open Cholecystectomy- A general surgeon may start with a laparoscopic technique and need to change to an open cholecystectomy for safety reasons. The surgeon makes an incision approximately 6 inches long in the upper right side of the abdomen and cuts through the fat and muscle to the gallbladder. The gallbladder is removed and any ducts are clamped off. The site is closed by sutures or staples and steri-strips are applied. Generally, the procedure takes about 1 to 2 hours.

* American College of Surgeons