# **Laparoscopic Cholecystectomy**

UG07 Lite - Expires end of January 2025

This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

© EIDO Systems International Limited. The operation and treatment information in this document is published under license from EIDO Systems International and is protected by copyright laws. Other than for your personal, non-commercial use, you may not copy, print out, download or otherwise reproduce any of the information.

eidohealthcare.com





### What are gallstones?

Gallstones are 'stones' that form in your gallbladder. They are common and can run in families. The risk of developing gallstones increases as you get older and if you eat a diet rich in fat.

For some people gallstones can cause severe symptoms, with repeated attacks of abdominal pain being the most common.

#### What are the benefits?

You should be free of pain and able to eat a normal diet. Surgery should also prevent the serious complications that gallstones can cause.

# Are there any alternatives?

The gallstones can be left alone but this may lead to complications later. Surgery is suggested as it is the only dependable way to cure the condition.

It is possible to dissolve the stones or even shatter them into small pieces but these techniques involve unpleasant drugs that have side effects and a high failure rate. Antibiotics can be used to treat any infection of your gallbladder. Eating a diet low in fat may help to prevent attacks of pain.

# What will happen if I decide not to have the procedure or the procedure is delayed?

Your gallstones may not cause any symptoms. If you have already had symptoms, it is likely that these will continue from time to time. There is a small risk of life-threatening complications.

If you develop any of the following symptoms, contact your healthcare team:

- Jaundice (yellow discolouration of the whites of the eyes, pale stools and dark urine).
- Constant, severe abdominal pain that does not get better after several hours.
- High temperature.

### What does the procedure involve?

The procedure is performed under a general anaesthetic and usually takes about an hour. Your surgeon will use laparoscopic (keyhole) surgery as this is associated with less pain, less scarring and a faster return to normal activities. They will make several small cuts on your abdomen so they can insert tubes (ports) into your abdomen. Your surgeon will insert surgical instruments through the ports along with a telescope so they can see inside your abdomen and perform the procedure.

Your surgeon will remove your gallbladder from your abdomen through one of the ports.

# How can I prepare myself for the procedure?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight. Your surgeon may suggest you follow a special diet for the 2 weeks before the procedure to reduce the size of your liver. The liver is a large organ that needs to be lifted to perform the surgery safely. If it is smaller, the risk of complications such as bleeding are reduced.

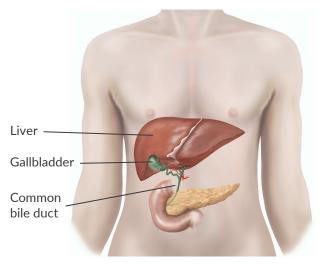
Regular exercise should help you prepare for the procedure, help you recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you may need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

### What complications can happen?

### General complications of any procedure

- Bleeding
- Developing a hernia in the scar
- Infection of the surgical site (wound)
- Venous thromboembolism (VTE)
- Chest infection



The position of the gallbladder

#### Specific complications of this procedure

#### Keyhole surgery complications

- Damage to structures such as your bowel, liver or blood vessels
- Developing a hernia near one of the cuts
- Surgical emphysema (a crackling sensation in your skin caused by trapped carbon dioxide)
- Gas embolism
- Conversion to open surgery

#### Cholecystectomy complications

- Leaking of bile or stones
- Retained stones in your common bile duct
- Continued pain
- Needing to go to the toilet more often
- Inflammation of the lining of your abdomen
- Bile duct injury (narrowing or blockage)
- Allergic reaction to the equipment, materials, medication or dye
- Bowel injury
- Pancreatitis, if a stone moves into your common bile duct
- Serious damage to your liver or its associated blood vessels
- Tissues can join together in an abnormal way

# Consequences of this procedure

Pain

Scarring of your skin, which can be unsightly

# What happens after the procedure?

You should be able to go home the same day. However, your doctor may recommend that you stay in hospital a little longer.

You should be able to return to work after 2 to 4 weeks, depending on how much surgery you need and your type of work.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

You should make a full recovery and be able to return to normal activities and eat a normal diet.

# Summary

Gallstones are a common problem. A procedure to remove your gallbladder should result in you being free of pain and able to eat a normal diet. Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

#### Acknowledgements

#### Reviewer

Roger Berry (MBBS, FRACS)

#### Illustrator

Medical Illustration Copyright © Medical-Artist.com