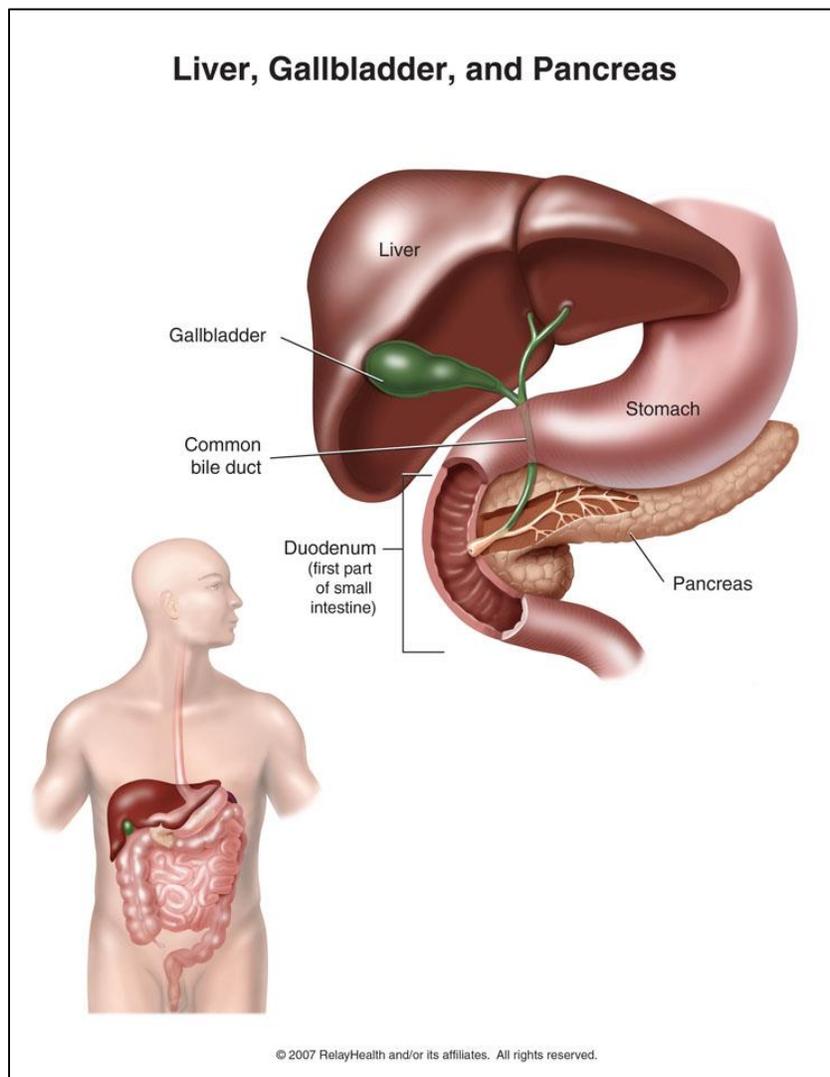


Gallbladder Removal Surgery: Laparoscopic Cholecystectomy

What is a laparoscopic cholecystectomy?

A laparoscopic cholecystectomy is a surgical procedure for removal of the gallbladder with a laparoscope and other surgical tools. A laparoscope is a thin metal tube with a light and tiny camera. Your provider can put the scope and tools into your abdominal cavity through several small cuts and see the organs inside the abdomen, including the gallbladder.

The gallbladder is a small sac that lies under the liver on your right side. It is part of the digestive system. It stores bile made by the liver to help you digest fats.



When is it used?

The gallbladder is removed when you have gallstones, pain, or inflammation (swelling) in your gallbladder. Gallstones are a common cause of inflammation, pain, and swelling of the gallbladder, but you can have these problems without stones. Gallstones may stay loose in your gallbladder or block the gallbladder and common bile duct (the tube through which bile moves from the liver into the intestine). Or they may pass into your intestine. The gallbladder can rupture (tear) if it swells too much, and this can be life-threatening.

Alternatives include:

- removing the gallbladder with open surgery instead of with a laparoscope
- dissolving gallstones with medicine if there are just a few tiny stones (the stones may come back, so the best treatment is usually removal of the gallbladder)

In most cases the laparoscopic method is used to remove the gallbladder rather than open surgery. If you have too much infection and scarring, or if cancer is suspected, you may need open surgery. This means your healthcare provider makes a larger cut (incision) in your abdomen and then removes the gallbladder through the cut. You should ask your healthcare provider about the choices for treatment.

How do I prepare for this procedure?

Plan for your care and recovery after the operation. Find someone to give you a ride home from the hospital.

Allow for time to rest. Try to find people to help you with your day-to-day duties for the first couple of days after surgery.

Follow your healthcare provider's instructions about not smoking before and after the procedure. Smokers heal more slowly after surgery. They are also more likely to have breathing problems during surgery. For these reasons, if you are a smoker, you should quit at least 2 weeks before the procedure. It is best to quit 6 to 8 weeks before surgery.

If you need a minor pain reliever in the week before surgery, choose acetaminophen rather than aspirin, ibuprofen, or naproxen. This helps avoid extra bleeding during surgery. If you are taking daily aspirin for a medical condition, ask your provider if you need to stop taking it before your surgery.

Follow any other instructions your provider gives you. The night before the procedure, eat a light meal such as soup and salad. Do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water. You may be given other instructions that you should follow, including taking important medicines.

What happens during the procedure?

You are given a general anesthetic. A general anesthetic will relax your muscles and put you to sleep. It will prevent you from feeling pain during the operation.

Your abdomen will be inflated with carbon dioxide gas. This helps your provider see the gallbladder and other organs. Your provider makes a tiny cut in your abdomen (usually in the area of the belly button) and inserts the laparoscope through the cut. Other tiny cuts are made to place tools used during the operation. Your provider removes the gallbladder and the stones with a tool that can cut tissue and stop bleeding. This could be electrical cautery (which uses electrical current) or ultrasound (sound wave energy).

The procedure usually takes about an hour, but it may take longer if there is scarring or infection.

What happens after the procedure?

Usually you can leave the hospital later the same day. In some cases an overnight stay may be needed, depending on your condition.

Because the intestines recover slowly, you cannot eat normally for the first couple of days after the operation. You will gradually return to a normal diet.

If your healthcare provider placed a drainage tube during surgery, it will be removed when there is no bile in the drainage fluid.

You may return to a normal lifestyle within 4 to 5 days, but it will take longer than this for your normal energy level to come back. Ask your provider if there are any restrictions on lifting or exercising. Ask what steps you should take and when you should come back for a checkup.

Removal of the gallbladder should cause few, if any, long-term problems. The digestive system can work normally without it. Occasionally there will be some loose stools.

What are the benefits of this procedure?

You will be rid of the painful gallbladder without the discomfort of abdominal surgery. Your stay at the hospital should be shorter.

What are the risks associated of procedure?

- There are some risks when you have general anesthesia. Discuss these risks with your healthcare provider.
- You may have infection or bleeding.
- The common bile duct or another nearby organ could be injured. You may need further surgery for repairs of the damage.
- The bile may leak from the liver or duct. To correct this, your provider may put in a drainage tube if one was not placed during surgery.
- You may have pain in your shoulder from the carbon dioxide used to inflate your abdominal cavity.
- Findings at the time of surgery may require changing the procedure to open surgery.

You should ask your healthcare provider how these risks apply to you.

When should I call my healthcare provider?

Call your provider right away if:

- You develop a fever over 100°F (37.8°C).
- You have redness, swelling, pain, or drainage from the incisions.
- You become dizzy and faint.
- You have chest pain.
- You have nausea and vomiting.
- You become short of breath.
- You have abdominal pain or swelling that gets worse.

Call during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.

Developed by RelayHealth.

Adult Advisor 2012.1 published by [RelayHealth](#).

Last modified: 2012-01-23

Last reviewed: 2011-12-31

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.

[References](#)

[Adult Advisor 2012.1 Index](#)

© 2012 RelayHealth and/or its affiliates. All rights reserved.