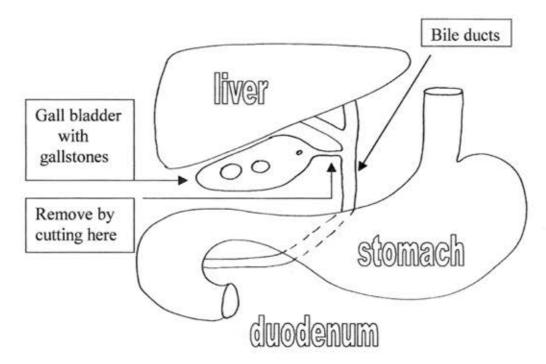
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Laparoscopic Cholecystectomy

(keyhole surgery for removal of the gall bladder)

Common Questions and Answers



- Q What does the gall bladder do?
- A It stores and concentrates bile, which is produced by the liver. It should not be confused with the urinary bladder.
- Q Why does it produce stones?
- A Usually because there is too much fat in the diet.
- Q Why should it be removed?
- A Usually because the stones are causing symptoms. It does not necessarily have to be removed just because it contains stones.
- Q Why not just remove the stones and leave the gall bladder?
- A Once the gall bladder has produced stones, it will produce more.

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- Q How does the body manage without a gall bladder?
- A It is not an essential organ. The liver continues to produce bile as normal.

 During an acute attack of inflammation (cholecystitis) the gall bladder usually doesn't function.
- Q Can I get rid of my gallstones with medicines?
- A Unlikely. Dissolving medicines have been tried but abandoned as they rarely work. They have to be taken long term, do not prevent attacks of pain, and the gallstones return when the medicines are stopped.
- Q How about shattering the stones?
- A This is 'lithotripsy' which is the use of shock waves. It can be very effective in kidney stones where there is a constant stream of urine to wash the particles away. It has been tried for gallstones and abandoned as it does not work and causes complications such as jaundice.
- Q Is the operation always completed by the 'keyhole' technique?
- A Yes, in more than 95% of patients. In a few (2% at the last analysis of my patients) it is necessary to open the abdomen in the traditional way.
- Q What are the specific complications of this operation?
- A The most important potential complication is damage to the bile ducts. If this is minor it is easily dealt with by placing a tube in the bile ducts using an endoscope. Major damage is much more serious and requires reconstructive surgery which might have to be performed by another specialist. This complication is thankfully rare (about 1 in 1000). I routinely perform an x-ray of the bile ducts during surgery in order to minimise this risk.
- Q How long will I be in hospital?
- A Most patients leave hospital on the day after surgery or the day after that, if the operation has been successfully performed by the 'keyhole' technique. If the abdomen has to be opened, the hospital stay is longer.
- Q What is the recovery period?
- A Patients are mobile the day after surgery, but usually require 2 weeks before resuming full time work. You must not drive a car until you are able to perform a full emergency stop (usually 5 to 10 days). Sexual and sporting activity can usually be resumed at about the same time. These times are longer if the abdomen has been opened.

REMEMBER: IF IT DOESN'T HURT, DO IT: IF IT DOES HURT, DON'T.