

Mr Rhys Thomas FRCS
Consultant General and
Upper Gastrointestinal Surgeon

Shirley Oaks Hospital,
Poppy Lane,
Shirley Oaks Village,
Croydon,
CR9 8AB.

Patient
Information
for Consent

UG07lite Laparoscopic Cholecystectomy

Expires end of May 2017
Issued April 2016

Local information

If you would like more information or if you would like to contact us please use any of the following:

Tel: 0208 655 5500
E-mail: rlt197@doctors.org.uk
Website: www.croydonsurgeon.com
Twitter: [@croydonsurgeon](https://twitter.com/croydonsurgeon)

Get more information and references at www.aboutmyhealth.org
Tell us how useful you found this document at www.patientfeedback.org



www.rcseng.ac.uk

www.rcsed.ac.uk

www.asgbi.org.uk

www.pre-op.org



This document will give you information about a laparoscopic cholecystectomy. If you have any questions, you should ask your GP or other relevant health professional.

What are gallstones?

Gallstones are 'stones' that form in your gallbladder (see figure 1). 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.

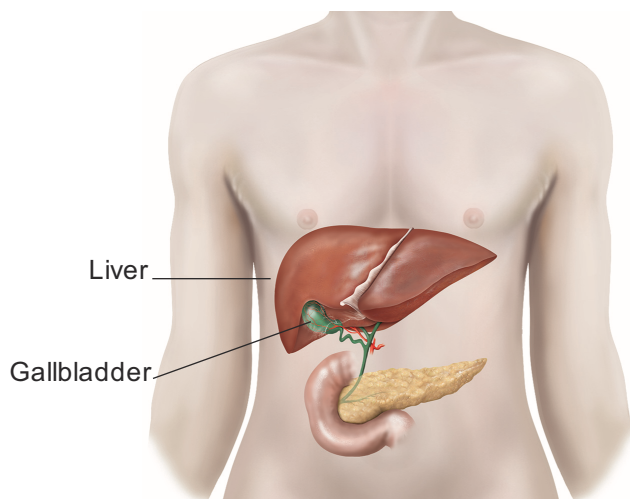


Figure 1

The position of the gallbladder

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

What are the benefits of surgery?

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 to surgery?

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 infections of your gallbladder. Eating a diet low in fat may help to prevent attacks of pain. However, these alternatives will not cure the condition and symptoms are likely to come back.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes about an hour.

Your surgeon will make several small cuts on your abdomen. They will insert surgical instruments, along with a telescope, inside your abdomen and perform the operation. Your surgeon will free up your cystic duct and artery. They will separate your gallbladder from your liver and remove it.

What complications can happen?

1 General complications

- Pain
- Bleeding
- Infection of the surgical site (wound)
- Unsightly scarring
- Developing a hernia in the scar
- Blood clots

2 Specific complications

- Damage to structures such as your bowel, bladder or blood vessels
- Developing a hernia near one of the cuts
- Surgical emphysema
- Leaking of bile or stones
- Retained stones
- Continued pain
- Diarrhoea
- Inflammation of the lining of your abdomen
- Allergic reaction
- Bile duct injury
- Bowel injury
- Serious damage to your liver

How soon will I recover?

You should be able to go home the next day. You should be able to return to work after two to four weeks, depending on the extent of surgery 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.

Summary

Gallstones are a common problem. An operation to remove your gallbladder should result in you being free of pain and able to eat a normal diet.

Acknowledgements

Author: Prof Simon Parsons DM FRCS (Gen. Surg.)

Illustrations: Medical Illustration Copyright ©

Medical-Artist.com

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