

Laparoscopic Cholecystectomy

The gallbladder is a pear-shaped organ that sits beneath the liver in the right -upper abdomen. It is attached to the bile ducts that come from the liver. These ducts carry liver bile to the intestine where the bile helps digest food. The gallbladder is not necessary to maintain good health.

Gallstones

Gallstones usually form in the gallbladder because of excessive cholesterol in bile. They are a very common medical problem. When they cause pain or other problems, treatment is usually needed. The removal of the gallbladder is one of the most common types of surgery done in this country. In the past, open abdominal surgery was the standard treatment. This procedure required a three to seven day stay in the hospital and a three to seven inch incision and scar on the abdomen.

Laparoscopy

Most females have heard of laparoscopy, also known as “bellybutton” or “Band-Aid” surgery. Gynecologists have long used this technique to tie the Fallopian tubes

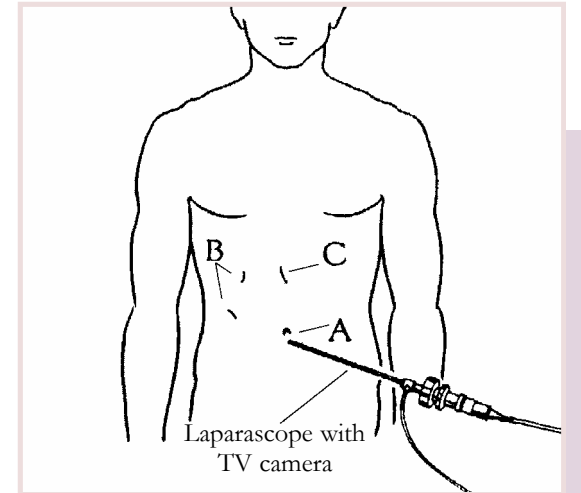
and to inspect the female reproductive organs. Now the use of the laparoscopy has been expanded to include removing a diseased gallbladder. With new video technology, the laparoscope has become a miniature television camera. Exquisite magnification is now possible, showing the intestinal organs in great detail.

Laparoscopic Cholecystectomy

A cholecystectomy is the surgical removal of the gallbladder. Using advanced laparoscopic technology, it is now possible to remove the gallbladder through a tiny incision at the navel. The technique is performed as follows. The patient receives general anesthesia. Then a small incision is made at the navel (A) and a thin tube carrying the video camera is inserted. The surgeon inflates the abdomen with carbon dioxide, a harmless gas, for easier viewing and to provide room for the surgery to be performed. Next, two needle-like instruments are inserted at points B. These instruments serve as tiny hands within the abdomen. They can pick up the gallbladder, move intestines around, and generally assist the surgeon. Finally, through point C, several different instruments are inserted to clip the gallbladder artery and bile duct, and to safely dissect and remove the gallbladder and stones. When the gallbladder is freed, it is then teased out of the tiny navel incision. The entire procedure normally takes 30 to 60 minutes. The three puncture wounds require no stitches and may leave very slight blemishes. The navel incision is barely visible.

What Are the Benefits?

The main benefit of this procedure is the ease of recovery for the patient. There is no incision pain as occurs with standard abdominal surgery. The patient is up and about the same day. In fact, up to 90% of patients go home the same day. The remainder are usually discharged the next day. And within several days, normal activities can be resumed. So the recovery time is much quicker. Also, there is no scar on the abdomen and the overall expense is usually low.



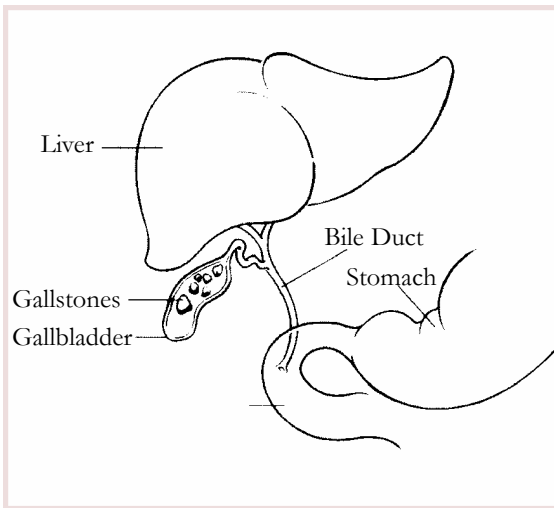
What Are the Complications?

While the procedure seems very easy for the patient, it is still abdominal surgery. And, even though infrequent, it still carries the same risks as general surgery. Current medical reports indicate that the complication rate is about the same for this procedure as for standard gallbladder surgery: very small.

- The surgeon will advise you that in about 5 to 10% of the cases, the gallbladder cannot be safely removed by laparoscopy. Standard open abdominal surgery is then immediately performed.
- Nausea and vomiting may occur after the surgery.
- Injury to the bile ducts, blood vessels, or intestine can occur, requiring corrective surgery.
- Quite uncommonly, a diagnostic error or oversight may occur.

Are there Other Treatment Options?

Depending on the size, number, and chemical makeup of gallstones, there is another way to treat the condition. If the stones are small, they may be



dissolved with long-term drug therapy lasting 12 to 18 months. A problem with this option is that recurrence of gallstones is frequent, so the problem may not be permanently solved. When symptoms are bad, it is usually unwise to wait because a major complication may occur.

Who Can't Have the Procedure?

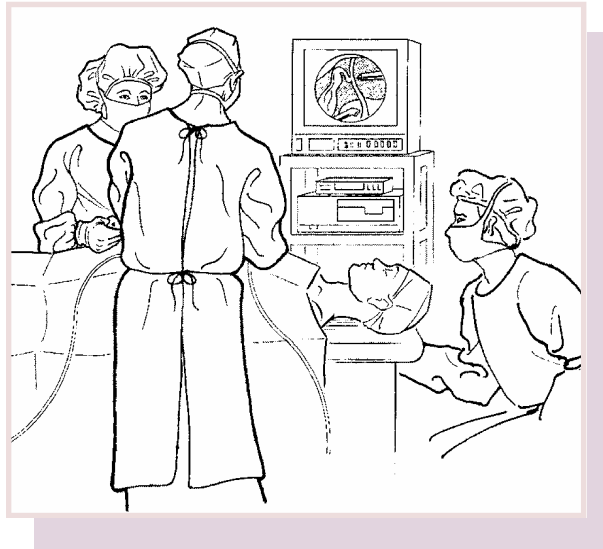
Surgeons have been amazed at how quickly laparoscopic gallbladder removal has developed. They are finding that cases previously felt to be unsuitable can now be done safely with this technique. Still, there are instances in which the surgeon will not recommend the procedure. The following list is a general one and each case must be individually evaluated:

- Pregnancy
- Obstruction of the intestine
- Previous surgery in the upper abdomen causing adhesions which may require conversion to the standard surgery requiring a skin incision.

In each instance, the surgeon will weigh the benefit for the patient against the risks, always considering other medical problems and always making the recommendation that is in the patient's best interest.

In Summary...

Gallbladder removal by laparoscopic surgery is an exciting development because it offers so much to the patient. The surgeon carefully evaluates each case and discusses it with the patient. While problems can occur with the procedure, they are unusual. In most instances, patients experience excellent results and resume their normal activities very quickly.



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GALLBLADDER REMOVAL BY LAPAROSCOPY



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