

An Audit of Laparoscopic Cholecystectomy.

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ABSTRACT:

Objective: Gallstones is a common problem, particularly among women. In modern medicine, uncomplicated gall stones are usually treated with Laparoscopic Cholecystectomy "Key-hole Surgery". It carries significantly lower morbidity and mortality as compared to open surgery. At Muhammad Medical College Hospital (MMCH) we have started the procedure in recent years.

Aims: To look into various demographic and clinic aspects of Laparoscopic Cholecystectomy done at MMCH.

Methods: Retrospective audit of record of last consecutive 99 patients undergoing Laparoscopic Cholecystectomy at MMCH. Research Ethics Committee approval was obtained (No.250811/REC/003).

Results: 33 Men and 66 women underwent this procedure. Average age was 45 year (range 16 to 75). Commonest presenting symptoms were Nausea/vomiting (n=36) and abdominal discomfort /pain (n=36). All patients had pre-procedure ultrasound scan showing gall stones. At surgery, 99/99 were confirmed to have gall stones. Although 9 also had adhesions, 6 were acutely inflamed and 3 had empyema gall bladder. There were 2 conversions. Average duration of stay in hospital after procedure was 9 days (range 3 to 20). 2 patients had wound infection and 3 atelectasis. No mortality was seen.

Conclusions: Laparoscopic Cholecystectomy is a safe procedure for gall stones disease.

Keywords: Laparoscopic cholecystectomy, conversion rate morbidity.

Introduction:

The introduction of Laparoscopic cholecystectomy has generated a new interest among general surgeons¹ it has gained acceptance and popularity to become the gold standard for the treatment of gallstones² First laparoscopic cholecystectomy was performed by Dr. Philippe Mouret in 1987 in Lyon France.

Methodology:

We looked at the records of 99 laparoscopic cholecystectomy records at Muhammad Medical College, Mirpurkhas Hospital. A form was developed to note the age, sex, presenting symptoms, confirmation of gallstones at Surgery, findings at surgery duration of hospital stay, morbidity and mortality. Hospital research ethical committee approved was obtained (No. 250811/Rec/003).

Result:

33 Men and 66 women underwent this procedure. Average age was 45 year (range 16 to 75). Commonest presenting symptoms were Nausea/vomiting (n=36) and abdominal discomfort /pain (n=36). All patients had pre-procedure ultrasound scan showing gall stones. At surgery, 99/99 were confirmed to have gall stones. Although 9 also had adhesions, 6 were acutely inflamed and 3 had empyema gall bladder. There were 2 conversions. Average duration of stay in hospital after procedure was 9 days

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Discussion:

As we know, gallstones are more common in women.³ means age is similar to other studies⁴. The conversion rate in our series is about 2%, which is less than most other studies^{5,6,7}. Duration of stay was longer than other series⁸. The complication rate was comparable to other studies and we did not find any mortality in records.

Conclusion:

Laparoscopic cholecystectomy is a safe procedure and can be performed in rural teaching hospital

Reference:

1. Saly B. Diagnostic Laparoscopic Surgery. *Laparosc Endosc* 1993; 3: 132-4.
2. Lim S H, Sale M, Poh B K, Tay K H. Laparoscopic cholecystectomy. An audit of training program. *ANZ J Surg* 2005; 75(4): 231-3.
3. Testas P, Dewatteville J C. Laparoscopic cholecystectomy. *Ann Gastroenterol Hepatol (Paris)* 1993; 29(6): 300-6.
4. Jitae N, Burcos T, Voiculescu S. Analysis of 3100 Laparoscopic cholecystectomy. *Chirurgia (bucur)* 2001; 96(6): 553-7.
5. Cheema S, Brannigan A E, Johnson S. Timing of laparoscopic cholecystectomy in acute cholecystitis. *Ir J Med Sci*, 2003; 172(3): 128-31
6. Ferrozzi L, Lippolis G, Petitti T. Laparoscopic cholecystectomy for acute cholecystitis: our experience. *G Chir* 2004; 25(3): 80-2.
7. Uchiyama K, Onishi H, Tani M. Timing of laparoscopic cholecystectomy for acute cholecystitis with cholecystolithiasis. *Hepatogastroenterology* 2004; 51(56): 346-8.
8. Hazzan D, Geron N, Golijanim D. Laparoscopic cholecystectomy in octogenarians. *Surg Endosc* 2003; (5): 773-6.

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