Gallbladder surgery

This leaflet provides you with information about gallbladder surgery. You should know that your personal situation may differ from the one described here.

The gallbladder is a small, pear-shaped organ found underneath the liver, in the top right-hand corner of the abdomen. The gallbladder is connected to the liver and the duodenum via the bile duct. Bile is an important fluid for the digestion of fats. It is continuously produced in the liver and stored in the gallbladder. As soon as food enters the intestine, the gallbladder pumps bile through its outlet duct into the duodenum. Once the gallbladder has been removed, this function is taken over by the liver and the bile ducts.

The most common gallbladder condition is the formation of gallstones. However, gallstones do not always give rise to symptoms. Gallbladder removal is often only necessary if any gallstones start causing symptoms. Surgery may also be required if the gallbladder becomes inflamed.

Diagnosis and tests

The doctor can reach a diagnosis based on your symptoms and on additional examination. This additional examination usually consists of an ultrasound scan of the gallbladder. This is a safe and painless examination that uses sound waves.

Treatment

The gallbladder is usually removed via keyhole surgery (laparoscopic cholecystectomy). Sometimes, open surgery requiring a larger incision is needed. Gallbladder surgery usually takes around one hour. The anaesthetist will provide you with information about the anaesthetic.

Pre-operative preparations

In preparation for your surgery, an IV drip will be introduced into one of your veins. This is a flexible plastic tube used to administer medication and fluids.

Laparoscopic gallbladder surgery

During this surgery, the doctor uses a video camera and special instruments to remove the gallbladder without making a large abdominal incision. Instead, only a few small incisions are made.

A laparoscope is a long straight tube with a small video camera and a light source mounted on it. Before introducing the laparoscope into the abdominal cavity, the abdominal cavity is filled with carbon dioxide, a harmless gas. This is necessary in order to obtain a proper overview. You may have sensitive shoulders for a few days after your surgery as a result. This will disappear by itself, so there is no need to worry.

During the surgery, the doctor may determine that it is not possible to (safely) remove the gallbladder by laparoscope. This may be because the gallbladder is severely inflamed, for example, or because there is excessive scar tissue or adhesions in the area around the gallbladder. In this case, it will be necessary to remove the gallbladder using open surgery.

As the doctor cannot see the gallbladder before inserting the laparoscope, some situations cannot be predicted and are only detectable once the surgery has already started. As such, you should always take into account that the doctor may need to perform open gallbladder removal surgery even though laparoscopic surgery was originally suggested.



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Open (conventional) gallbladder surgery

During this surgery, the doctor will make a ten to fifteen-centimetre incision through which the gallbladder can safely be removed. This incision may be longer or shorter depending on the size of your abdomen and the reason for making the incision. This incision will usually be located in the middle of the upper abdomen or on the right, underneath the costal arch.

What you need to do to prepare for the operation

Blood thinners

If you use blood thinners, you must report this to the doctor before undergoing treatment, as people these medicines cause an increased risk of post-operative bleeding. You may need to stop taking these medicines temporarily in consultation with your doctor, or replace them temporarily with different medicines.

Painkillers

You can purchase painkillers, such as paracetamol, at a pharmacy or chemist. Make sure you have painkillers at home prior to your surgical procedure.

After surgery

You may feel nauseous and thirsty after the surgery, and you may be given anti-nausea medication as a result. To ensure that you get enough fluids, an IV drip will be inserted into your arm.

If you are able to drink without any problems, you can also gradually start eating again. As soon as you are able to drink sufficiently, the IV drip will be removed.

Sometimes, a wound drain will be left in the wound site to drain blood and fluids. Once no more fluid is coming out of the drain, it can be removed. This usually occurs after a few days.

Possible complications

As with any surgery, gallbladder surgery involves a risk of bleeding, inflammation around the wound, thrombosis, a bladder infection or pneumonia. One serious but rare complication after this surgery is damage to the bile ducts. The consequences depend on the location and cause of the injury and on when it was identified. A recovery operation, extra tests or an extra surgical procedure may be required. In the long term, an incisional hernia may form.

Discharge

You can go home the same day or the next day after 'planned' gallbladder surgery, depending on the time you underwent the surgery and your symptoms. For open gallbladder surgery, you may need to stay at the hospital a little longer. Following acute surgery, your time at the hospital depends on your recovery and any post-operative treatment that may be required, such as a course of antibiotics.

Check-up appointment

When you are discharged, you will be given an appointment for a (telephone) check-up at the outpatient clinic. If any problems occur at home (before this appointment), please contact the Surgery Outpatient Clinic or A&E.

Sutures

Your sutures will dissolve by themselves. If non-dissolvable sutures or staples were used, you will be told about this, and they will be removed between ten and fourteen days after your surgery. You can make an appointment with your GP or with us at the outpatient clinic to have this done.





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Dressings

Shower dressings (transparent dressings) can be left in place for five to seven days. You can shower as usual with these dressings. Non-transparent dressings must be replaced every day until your wound is dry.

Advice for when you return home

Pain

In case of pain, you can use painkillers like paracetamol. You can use two painkiller tablets up to four times a day (i.e. 1000 mg four times daily). We recommend that you take painkillers as standard during the first few days. Once your pain is under control, you can reduce or even stop the painkillers after a few days, depending on your pain symptoms.

Wound care

The wound does not require any special care. You can wash or shower yourself as normal. We recommend that you do not go swimming, visit a sauna or have baths for one to two weeks.

Diet

You do not have to observe a special diet. However, it is a good idea to eat light meals immediately after your surgery. Keep trying to see what you are able to tolerate. If you develop symptoms after eating certain foods, leave them out for a while and try again later. After a little while, you will be able to eat all the things you used to eat again.

Work

Patients often underestimate how tired they will feel once they return home. Support from the people in your immediate environment can certainly help. You will soon notice that you are gradually able to do more and more. Once the wound has healed (after one to two weeks), you can resume all of your normal activities. Usually, you can get back to work fairly quickly after undergoing a laparoscopic cholecystectomy (after one to two weeks on average). After open surgery, your recovery will generally take a little longer. This also depends on the type of work you do. Please discuss any work-related matters with your employer.

To conclude

If you still have questions after reading this leaflet, feel free to ask your attending doctor. If any unexpected problems arise that worry you, feel free to call the Surgery Outpatient Clinic (+31 88 125 42 37). Outside of working hours, you can call the main number of the hospital (+31 88 125 00 00).

Scheduling an appointment

If you would like to make, cancel or reschedule an appointment, please contact the Appointment Centre (+31 88 125 00 00).



