Gallstones

Gallstones are common but cause no symptoms in two out of three people who have them. They sometimes cause problems such as pain, jaundice, pancreatitis, and gallbladder inflammation. Surgery is the usual treatment for gallstones that cause symptoms.

Understanding the gallbladder and gallstones

The gallbladder lies under the liver on the right side of the upper abdomen. It is like a pouch which comes off the main bile duct and fills with bile. It is a 'reservoir' which stores bile. The gallbladder contracts (squeezes) and empties bile back into the main bile duct which then passes into the intestine. Bile is a fluid made in the liver and helps to digest food, particularly fatty foods. Gallstones occur when bile forms stones. Sometimes just a few small stones are formed; sometimes a great many. Occasionally, just one large stone is formed.

About one in three women, and one in six men, form gallstones at some stage in their life. Gallstones become more common with increasing age. The risk of forming gallstones increases with pregnancy, obesity, rapid weight loss, having a close relative with gallstones, diabetes and certain medicines such as the contraceptive pill.

What problems can gallstones cause?

Commonly they cause no problems

Most people with gallstones do not know they have them. It is common to have stones in the gallbladder that cause no symptoms.

Possible problems

About one out of five people with gallstones develop symptoms or problems. Symptoms include:

- Biliary colic. This is a severe pain in the upper abdomen. The pain is usually worst on the right-hand side, just below the ribs. The pain can last just a few minutes but, more commonly, lasts several hours. A severe pain may only happen once, or it may flare up from time to time. Sometimes less severe but nagging pains occur now and then, particularly after a fatty meal when the gallbladder contracts most.
- Inflammation of the gallbladder. This is called cholecystitis and can lead to infection in the gallbladder. Symptoms usually develop quickly and include abdominal pain, fever, and being generally unwell. Admission to hospital and removal of the gallbladder is usually needed.
- Jaundice. This is an uncommon complication of gallstones. It occurs if a gallstone comes out of the gallbladder, but gets stuck in the bile duct. This causes jaudice (yellowing). The stone will typically be passed into the intestine. However, if it does not pass, an endoscopy procedure called ERCP (endoscopic retrograde cholangiograpy) should be done to remove the stone. If this is not possible, some may require an operation to remove the gallstone which has become stuck in the bile duct.

• Pancreatitis. This is an inflammation of the pancreas. The pancreatic duct and bile duct join together just before opening into the duodenum. If a gallstone becomes stuck here it can cause pancreatitis which is a painful and can be a serious condition.

How are gallstones diagnosed?

In many cases symptoms, combined with tenderness in the upper right side of the abdomen, will alert the doctor that this is likely to be gallstones. An ultrasound is more commonly performed. Other tests are sometimes needed to rule out other conditions such as stomach ulcers, irritable bowel syndrome and tumors.

What are the treatments for gallstones?

No treatment is needed in most cases

In general, it is often best to leave gallstones alone if they cause no symptoms.

Medication

Once gallstones start giving symptoms, surgery is the best treatment. You may be given painkillers and antibiotics if the gallbladder gets infected. Surgery is best performed early.

Surgery

An operation to remove the gallbladder (<u>cholecystectomy</u>) is the usual treatment if you have symptoms caused by gallstones. Different techniques to remove the gallbladder exist:

- Laparoscopic cholecystectomy: Laparoscopic surgery is now the most common way to remove a gallbladder. Small incisions are made in the abdomen with small scars remaining afterwards. The operation is done with the aid of a special telescope that is pushed into the abdomen through one small incision. This allows the surgeon to see the gallbladder. Instruments pushed through other small incisions to remove the gallbladder. Laparoscopic surgery is not suitable for all people.
- Open cholecystectomy: Some people with gallstones need a traditional operation to remove the gallbladder. In this operation a larger incision is made to remove the gallbladder.

After a gallbladder is removed

You do not need a gallbladder to digest food. Bile still flows from the liver to the intestine once the gallbladder is removed. However, there is no longer any storage area for bile between meals. The flow of bile is therefore constant, without the surges of bile that occur from a gallbladder when you eat a meal. You can usually eat a normal diet without any problems after your gallbladder is removed. However, up to half of people who have had their gallbladder removed have some mild abdominal pain or bloating from time to time. This may be more noticeable after eating a fatty meal. Some people notice an increase in the frequency

Ellen Hagopian, MD, FACS Hepato-Pancreato-Biliary Surgery ellenhagopianmd.com of passing stools after their gallbladder is removed. It rarely needs to be treated and does not typically become troublesome.

Sources: www.patient.co.uk

www.bupa.co.uk/individuals/health-information

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