

Gallstones

Your treatment options. Your second opinion.



What are gallstones

Your gall bladder may be affected by gallstones, which usually vary in size from a grain of sand up to a pebble, and may be made up of cholesterol, bile pigment or calcium salts.

The gall bladder is a small pear-shaped organ in your upper abdomen (tummy) that stores bile, a liquid made in the liver. Bile is released from the gall bladder into the bile duct (tube) and then passes into your intestines to help digest fatty foods. Gallstones develop for different reasons such as the liver producing too much cholesterol or your gall bladder failing to empty normally, which cause the bile to harden.

Symptoms may occur when a gallstone temporarily blocks the gall bladder neck or the bile duct. The most common symptoms are attacks of pain in your abdomen and back, and increased abdominal pain after eating a fatty meal. This is commonly called biliary colic. Less frequently, complications may develop such as jaundice (skin and whites of the eyes yellowing) or complications that require urgent hospital treatment such as pancreatitis (severe pain, swelling, bleeding, inflammation of the pancreas) or cholecystitis (severe pain and inflammation of the gall bladder).

Gallstones are more common the older you are, causing illness or pain in 15% of people aged 50 years and over. They're also more likely in women than men and people who are overweight.

Diagnosis

Seven out of 10 people with gallstones don't experience symptoms and often their gallstones are only discovered by chance during tests for another reason.

If you develop symptoms, an ultrasound test is usually undertaken to help confirm that the cause is gallstones. An endoscopic retrograde cholangiopancreatography (ERCP) may also be required if, for example, bile duct blockage leads to a complication such as pancreatitis. An ERCP involves passing down a thin tube with a video camera at the end (endoscope) into your intestines to the bile duct. A dye is then injected and an x-ray used to find gallstones.

Treatment

If your gallstones don't cause symptoms, active monitoring may usually be suggested. This involves being advised on what symptoms to look out for and only receiving

treatment if they develop in the future. The risk of developing symptoms is generally considered to be low, about 1 in 10 after five years.

If you have symptoms, the suggested treatment usually depends on various factors including how symptoms are affecting your life, the size, location and type of gallstones, and your risk of complications. In general, once you have symptoms they're likely to keep coming back and there's an increased risk of complications developing.

Non-surgical treatments

If you have mild or less frequent symptoms, pain reduction medications and healthy lifestyle changes, particularly a healthy diet and achieving a healthy weight, may be suggested. For small and soft stones, ultrasound treatment called lithotripsy may be recommended. Medications to dissolve gallstones are rarely suggested due to side effects and variable success.

Procedures

The main procedures for gallstones are surgery to remove the gall bladder (cholecystectomy) and less commonly ERCP. Gallstones in the bile duct may be taken out during an ERCP performed for diagnosis. However, this doesn't remove gallstones in the gall bladder that may in some cases cause symptoms or complications in the future.

Surgical gall bladder removal removes the organ as a source of gallstones. The gall bladder isn't essential and bile is still able to flow from the liver into the intestines, enabling you to live perfectly well.

Healthy lifestyle for gallstones

A healthy, well-balanced diet and achieving a healthy weight through a gradual weight loss program may often be recommended for prevention gallstones.

- > Diet
 - > Avoid eating too many fatty, high-cholesterol foods such as: fatty meats, butter, cakes, biscuits and fast foods like meat pies.
 - > Include plenty of fresh fruit, vegetables and wholegrains.
- > Weight loss:
 - > Eat a healthy diet.
 - > Do regular exercise.
 - > Avoid quick weight loss, which can increase gallstone risk

Always consult a medical expert before commencing a course of treatment for any medical condition.





Gall bladder removal surgery (cholecystectomy)

Surgery to remove your gall bladder may be suggested:

- > if your gallstones cause symptoms.
- > in infrequent cases, if your gallstones don't cause symptoms, in order to prevent health problems such as symptoms or complications in the future.

The preferred method of removing the gall bladder is usually keyhole surgery, largely because it often enables a quicker recovery compared to open surgery.

Keyhole surgery involves small incisions (cuts) in the abdomen. An endoscope and surgical instruments are inserted through the incisions to remove the gall bladder. Recovery in hospital afterwards may often take a few hours -2 days.

If keyhole surgery isn't possible or risky, open surgery may be performed, which involves a longer incision to remove the gall bladder, usually followed by 3-8 day recovery in hospital. This open surgery requirement may only be discovered when keyhole surgery is attempted and it is found too risky.

Gall bladder removal surgery and medical research

When evaluating you for gall bladder removal surgery or other treatments for gallstones, your treating medical specialist will take into account many complex factors, including the latest medical research.

The research states that gall bladder removal may usually stop symptoms due to gallstones, and it's considered the preferred standard of care for people with gallstones that cause symptoms.

However, for gallstones that don't cause symptoms, it's not known whether gall bladder removal is more effective compared to active monitoring, because insufficient research has been done yet that directly compare both approaches to each other.

Due to this lack of evidence, it's usually recommended that except in rare cases, gall bladder removal should not be performed for gallstones that don't cause symptoms because the potential benefits of prevention may not outweigh the potential risks of surgery.

Gall bladder removal surgery and risks

While complications following gall bladder removal surgery aren't common, they do occur, including bile duct damage, infection, bleeding, blood clots and bile duct leakage (from where the gall bladder was previously attached).

Understanding these risks is important if you are weighing up whether to have surgery, both when your gallstones cause symptoms and if they don't cause symptoms.

Gall bladder removal and gallstones – the main points

- > If you have gallstones, you should discuss with your doctor whether you need gall bladder removal surgery, especially if they are causing symptoms.
- > If you're considering gall bladder removal surgery, take into account the medical studies showing that it may usually be effective if you have symptoms, however if you don't have symptoms it's not known if it's more effective than active monitoring.
- > If you have gallstones, a healthy diet and achieving a healthy weight may often be recommended.

Would you like a second opinion?

Deciding on a treatment path for a medical condition can be a difficult, complex and stressful question.

Would you like the benefit of an expert second opinion to decide on your treatment options?

If you want to know more about GPS² or have a general enquiry, please contact us on 1800 477 246 or email via contact@gps2.com.au

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