

AB181. 135. Post-operative biliary type symptoms after cholecystectomy—a real entity or just nuisance value?

Elena Krombholz, Louise Gobnait Collins, Liam Joyce

Department of Surgery, Galway Clinic, Galway, Ireland

Background: Right upper quadrant (RUQ) pain can persist after successful laparoscopic cholecystectomy (LC). This can cause patient distress and significant diagnostic and therapeutic challenges.

Methods: A retrospective review of 210 consecutive patients undergoing cholecystectomy by a single surgeon was completed. Demographics, indication for procedure, type of procedure, final diagnosis and further treatment were reviewed. The presence and etiology of persistent RUQ post-operative pain was evaluated in this patient group.

Results: The data of 210 patients was assessed. Conversion to open surgery was 4.3% (n=9). Planned open surgery

was 1.9% (n=4). There were no postoperative deaths or major complications. About 8.37% (n=17) of patients reported persistent RUQ pain post-operatively. Within this patient subgroup, 13 patients underwent LC and 4 patients underwent open surgery. The primary causes of persistent post-operative pain in this patient subgroup were musculoskeletal (53%, n=9), neuropathic (12%, n=2), common bile duct stone (6%, n=1), and no cause found (12%, n=2).

Conclusions: This study demonstrated that post-cholecystectomy pain syndrome is a real entity affecting 8% of this study cohort. The primary cause of post-operative pain was found to be musculoskeletal in origin. However for one patient in this cohort, the primary cause of pain was a common bile duct stone. Therefore, it is essential that post cholecystectomy patients with persistent RUQ pain are fully investigated to ensure that biliary pathology is not missed.

Keywords: Post-operative biliary type symptoms; right upper quadrant pain (RUQ pain)

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