

Poster Presentation AB011. Results of laparoscopic cholecystectomy for acute calculous cholecystitis in Nguyen Dinh Chieu-Ben Tre Hospital

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Background: Cholecystitis is an inflammation of the gallbladder that most commonly occurs as a result of obstruction of the cystic duct by gallstones. The current standard of treatment for acute cholecystitis is cholecystectomy. Debate continues regarding the clinical outcomes of early laparoscopic cholecystectomy versus delayed laparoscopic cholecystectomy for acute

cholecystitis. The aim of this study was to compare clinical outcomes of early laparoscopic cholecystectomy and delayed laparoscopic cholecystectomy

Methods: Retrospective and descriptive study.

Results: A total of 40 patients who had acute calculous cholecystitis underwent laparoscopic surgery between January 2011 and June 2013. Conversion to open cholecystectomy was required in 1 (2.5%) patients. The mean operation time was 72.8 minutes. Intraoperative complication: bleeding 2 (5%) patients, peritoneal gallbladder 5 (12.5%) cases. Postoperative complications consisted 1 (2.5%) patient mild subhepatic fluid collection. There was no mortality. The mean hospital stay was 6 days. **Conclusions:** Early laparoscopic cholecystectomy for acute cholecystitis yields more favorable clinical outcomes than delayed laparoscopic cholecystectomy.

Keywords: Cholecystitis; acute calculous cholecystitis; laparoscopic cholecystectomy

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