



Laparoscopic Cholecystectomy

What is it?

A laparoscopic cholecystectomy is the removal of the gallbladder and gallstones by keyhole surgery.

Sometimes, the surgeon may decide that it is safer to complete the operation by open cut surgery. The decision is based on patient safety and does not mean there has been a complication. This happens in about 5% of surgeries and factors such as obesity, previous abdominal surgeries and gall bladder inflammation may increase the possibility that the keyhole surgery can't be completed.

What do I need to do before the procedure?

Your medical team may need to do some pre-operative tests. These may include blood tests, chest x-ray and ECG depending upon your age and medical condition. You will usually attend a pre-admission clinic where these are looked at.

It is important to stop smoking for at least a few days before the surgery. You will also need to make sure there is a responsible adult that can stay with you on the night following the surgery.

What will happen?

A laparoscopic cholecystectomy is done under general anaesthesia, which means that you are asleep throughout the procedure. It is usually performed through four small cuts of about 5-10mm each made in the abdominal wall.

After the surgeon removes the gall bladder, the incisions are closed with dissolving stitches under the skin or with surgical tape.

What can I expect after?

Gall bladder removal is major abdominal operation and a certain amount of post-operative pain occurs. It is common for you to experience some nausea and vomiting.

You will most likely be able to leave hospital on the same day. You will need to be able to handle a liquid diet before leaving. You can be active after the surgery and walking is encouraged. However, a general rule is "if it hurts don't do it."

Where can I find out more?

- **HealthDirect** - laparoscopic cholecystectomy: healthdirect.gov.au

Blood thinners and surgery

Drugs such as Aspirin, Warfarin, Plavix and other blood thinning agents may need to be stopped prior to your surgery.

If you are on any of these tablets, you must discuss this with your surgeon and at the Preadmission Clinic to make sure you receive the right advice regarding these medications.