

facts about...

GALLSTONES

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What are gallstones?

Gallstones are stones that form in the gallbladder. The gallbladder is a small sac that lies below the liver and acts as a storehouse of bile, a greenish-brown liquid produced by the liver. During the digestion of food, the gallbladder contracts and bile passes from it through the bile duct and down into the upper part of the bowel. Gallstones may also pass into the duct through a narrow tube (called a cystic duct).

Why do gallstones form?

This question has no simple answer. If the liver produces too much cholesterol, cholesterol crystals may form in the bile and become stones. In other people, the stones form because of changes in other bile components or because the gallbladder fails to empty normally.

Gallstones become more common with advancing age. They are more common in women than in men, in people who are overweight and in those with a family history of gallstones.

What symptoms do gallstones cause?

About 7 out of 10 people with gallstones have no symptoms. For the rest, the most common symptom is episodes of moderate or severe pain in the upper abdomen or back as small

stones move into and block the cystic duct. This blockage sometimes produces an infection in the gallbladder (cholecystitis). Occasionally, stones at the lower end of the duct cause inflammation of the pancreas gland, a very painful condition called pancreatitis. Stones in the bile duct may also produce pain and a blockage, causing jaundice (yellow eyes and skin) or bile duct infections.

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is episodes of moderate or
severe pain in the upper
abdomen or back.

Indigestion, fullness, nausea and fatty food intolerance are not due to gallstones, and won't be improved by surgery.

Are gallstones serious?

Most people with gallstones never have a serious complication. However, if stones are present for many years, about 1 in 10 people will develop jaundice, pancreatitis or infections in the gallbladder or bile duct. These complications often require urgent treatment in hospital, but preventative surgery is rarely advisable.



How are gallstones diagnosed?

The first investigation is usually an ultrasound study, a painless and relatively simple test that is highly accurate in showing up stones in the gallbladder. Further investigation may be needed if serious complications occur, or if stones in the bile duct are thought likely. For example, "ERCP" may be needed to demonstrate and remove bile duct stones. In ERCP (endoscopic retrograde cholangiopancreatography), a flexible tube called an endoscope is passed through the oesophagus and stomach into the small bowel, dye is injected into the bile duct and then x-rays are taken.

Do I need an operation?

If you have stones in the gallbladder but no symptoms, you don't need an operation. If you have episodes of pain, it is wise to have an operation, although it need not be done urgently.

If you have complications such as jaundice or infections in the gallbladder or bile duct, you need urgent treatment, usually surgery or endoscopic removal of a stone in the bile duct.

What sort of operation might I need?

Stones in the gallbladder are treated by removal of the gallbladder (cholecystectomy), now usually done by "keyhole" surgery, using laparoscopes. The operation requires three small incisions in the abdomen and usually 1 or 2 days in hospital. Occasionally, "keyhole" surgery is impossible or risky and the gallbladder is instead removed through a longer incision below the right ribs. This requires a longer hospital stay, perhaps from 5 to 8 days. Stones in the bile duct can be treated either endoscopically or by surgery.

Operations such as these are safe but always carry a small risk of problems during surgery (such as bleeding or damage to the bile duct) and of later complications such as chest infections. Occasionally, x-rays taken during the operation show a stone in the bile duct that requires a later endoscopic procedure. If you are concerned about possible risks, ask your doctor for further information.

Will an operation cure my symptoms?

Surgery will cure any symptoms arising from your gallstones – and you can live perfectly well without your gallbladder! After surgery, bile made in the liver will continue to aid digestion and you will not need to change your diet.

This information booklet has been designed by the Digestive Health Foundation as an aid to people who have gallstones or for those who wish to know more about it. This is not meant to replace personal advice from your medical practitioner.

The Digestive Health Foundation (DHF) is an educational body committed to promoting better health for all Australians by promoting education and community health programs related to the digestive system.

The DHF is the educational arm of the Gastroenterological Society of Australia, the professional body representing the Specialty of gastrointestinal and liver disease in Australia. Members of the Society are drawn from physicians, surgeons, scientists and other medical specialties with an interest in GI disorders.

Since its establishment in 1990 the DHF has been involved in the development of programs to improve community awareness and the understanding of digestive diseases.

Research and education into gastrointestinal disease are essential to contain the effects of these disorders on all Australians.

Further information on a wide variety of gastrointestinal conditions is available on our website.



Digestive Health
Foundation
c/-GESA
145 Macquarie Street
SYDNEY NSW 2000
Australia

Phone (02) 9256 5454
Fax (02) 9241 4586
dhf@gesa.org.au
<http://www.gesa.org.au>

This brochure is promoted as a public service by the Digestive Health Foundation. This leaflet cannot be completely comprehensive and is intended as a guide only. The information given here is current at the time of printing, but may change in the future.

If you have further questions you should raise them with your own doctor.

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