A STUDY FOR CORRELATION OF CLINICAL AND HISTOPATHOLOGICAL SPECTRUM OF GALL BLADDER DISEASE

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INTRODUCTION

- The gallbladder diseases are most common gastrointestinal pathology worldwide including India.
- The commonest biliary pathology is gallstone disease and is a major cause of morbidity and mortality.
- Early carcinoma of gallbladder notoriously remains undiagnosed without histopathology as it neither produces clinical symptoms or signs nor provides any clues on ultrasound assessment.

MATERIALS AND METHODS

- This was a prospective and observational study.
- Total 140 patients were found eligible for study,but some cases were lost to follow-up,not consenting,other complications. The study was considered complete when a total of 100 patients completed it, over a period of one and half year from 1 Jan 2018 to 31 July 2019 with documented benign gall bladder diseases, confirmed on ultrasound examination and had undergone Laparoscopic Cholecystectomy. Patients with Suspected/ proven malignancy of gall bladder were excluded from the study

RESULTS

- The mean age for gallstone disease was found to be 45±14.5 years and maximum cases were found in 40-49 years age group .
- 79% of cases were females with male to female ratio is 1:3.76.
- In this study, 73% of cases had multiple calculus and 27% had single calculus. 65% had stone size between 10 to 20mm .
- In our study biliary colic was seen in 83% of cases, cholelithiasis with choledocholithiasis in 5%, gallstone pancreatitis in 5% and acute calculus cholecystitis in 7% of cases.

Distribution of Clinical Spectrum According to Histological Spectrum.

	CLINICAL SPECTRUM											
HISTOLOGICAL SPECTRUM	Total	Biliary Colic		Cholelithiasis + Choledocholithiasis		Gallstone Pancreatitis		Acute Calculus Cholecystitis		Total		p value
		n	%	n	%	n	%	n	%	n	%	
Chronic Cholecystitis	90	77	85.5	4	4.4	4	4.4	5	5.5	90	100	0.724 NS
Chronic Atrophic Cholecystitis	1	1	100	0	0	0	0	0	0	1	100	1.000 NS
Chronic Cholecystitis with Intestinal Metaplasia	2	1	50	1	50	0	0	0	0	2	100	0.475 NS
Chronic Cholecystitis with Mild Dysplasia	1	1	100	0	0	0	0	0	0	1	100	1.000 NS
Xanthogranulomatous Cholecystitis	1	0	0	0	0	0	0	1	100	1	100	1.000 NS
Chronic Cholecystitis with Adenomyomatous Hyperplasia	2	2	100	0	0	0	0	0	0	2	100	1.000 NS
Incidental Ca GB	3	3	100	0	0	0	0	0	0	3	100	1.000 NS

p--values by Chi-Square test. P-value<0.05 is considered to be statistically significant. NS-Statistically non-significant.

- During our histological evaluation, chronic cholecystitis was seen in 90% of cases. Atrophic cholecystitis in 1%, intestinal metaplasia in 2%, dysplasia in 1% and xanthogranulomatous cholecystitis in 1% of cases. Similarly, adenomyomatous hyperplasia in 2% and carcinoma of gallbladder was detected in 3 patients (3% of cases).
- The distribution of clinical spectrum in relation to histological spectrum was also studied. The most common clinical spectrum biliary colic and chronic cholecystitis was the most common histological spectrum. It was found that the distribution of various clinical spectrum did not differ significantly between the cases with and without chronic cholecystitis on histological examination (P-value>0.05). Same observation was made for other histological diagnosis.

CONCLUSION

The incidence of gallstone is more in females as compared to males. The prevalence of gallstone is more in middle and elderly age group therefore it is concluded that its incidence shows an increasing trend with age and it is a significant cause of morbidity.

The most common clinical diagnosis is biliary colic. Ultrasound abdomen was diagnostic in all the cases. Multiple stones are more common than single stone. Laparoscopic cholecystectomy is the operative modality of choice with conversion to open being done only in difficult cases.

Three cases of incidental carcinoma gallbladder also detected. No significant correlation was found between clinical and histopathological diagnosis.

We conclude that routine cholecystectomy performed for a common condition like gallstone disease can result in a diverse and wide spectrum of histopathological lesions ranging from benign diagnosis to an unexpected gallbladder malignancy. Therefore it further obviates the need of histopathology for confirmed diagnosis.