The clinical outcome of laparoscopic cholecystectomy beyond 72 hours after onset in acute cholecystitis under era of early cholecystectomy fashion.

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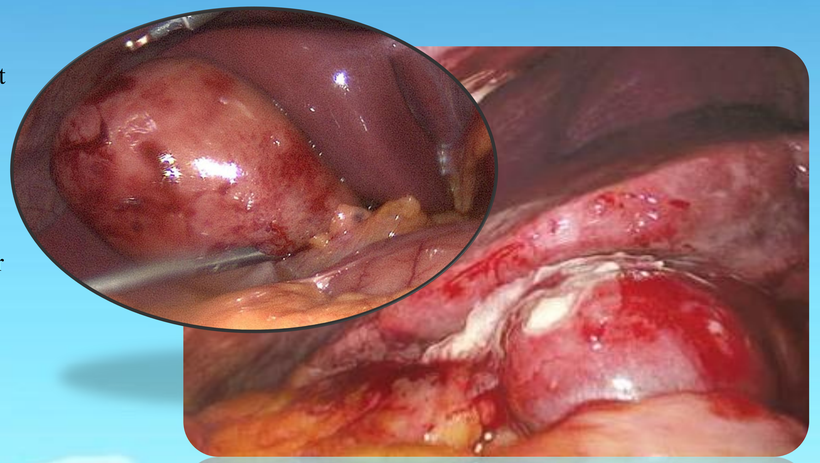
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Background

Early laparoscopic cholecystectomy (ELC) is the standard treatment of choice in almost acute cholecystitis (AC) patients and should operated within 72 hours after onset. Although, this early cholecystectomy fashionare most recently recommended, many of patients have to perform late laparoscopic cholecystectomy (LLC) beyond 72 hours of symptom according to limitation of patients condition and tightness of operating theater schedule.However lack of evidence support these LLC outcome.

Objective

Compare clinical outcome of early laparoscopic cholecystectomy (ELC) and late laparoscopic cholecystectomy (LLC) in acute cholecystitis patients.



Method

1,319 laparoscopic cholecystectomy (LC) performed during January 2014 to December 2020 in Bhumibol Adulyadej Hospital. There were124 LCs underwent for admitted acute cholecystitis patients were reviewed and classified as ELC and LLC. Primary outcome was total length of hospital stay, Secondary outcome were post-operative hospital stay, conversion rate, operative time, blood loss and complication.

Result

124 LCs for AC patients and classified as ELC 49 patients and LLC 75 patients. Both group showed no significant difference in patient characteristic (Gender, Age,ASA classification and severity grading by Tokyo guideline 2019). The LLC significantly higher blood loss than ELC (144 vs 77 ml, p=0.025, 95%CI (-124.7,-8.4)) and total length of hospital stay (9.39 vs 6.24 day, p=0.001, 95%CI(-4.8,-1.4)), However postoperative hospital stay in both group were no significantly differences (5.47vs5.08, p= 0.614,95%CI(-2.0,1.22)). Moreover, there were no significant differences in conversion rate (5.4% vs 4%, p= 0.751, 95%CI(-0.91,0.06)), operative time (136 vs131min, p=0.5601, 95%CI(-22.2,10.9)) as well as operative related complication (9.3% vs 8.1% , p= 0.388, 95%CI(-0.149,0.05)).

Conclusions

Late laparoscopic cholecystectomy in acute cholecystitis performing beyond 72 hours of symptom onset are safely performed under circumstance experience surgeons and selected patients.

Reference

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