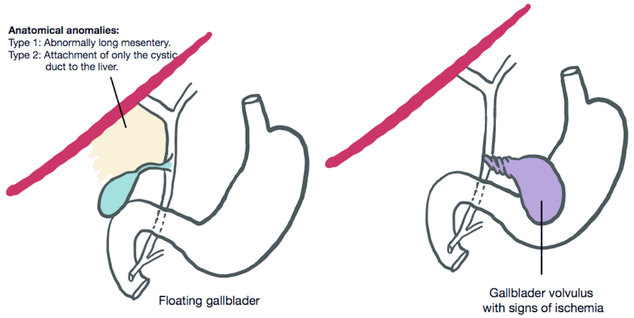
SAGES 2022
DENVER, CO

GALLBLADDER VOLVULUS, AN UNUSUAL ENTITY. CASE REPORT AND LITERATURE REVIEW

Camila D Sotomayor Ledezma, MD[1]; Katrina Lolas Tornquist, MD[2]; Francisco Rivera Roa, MD[2]; Mauricio Chang Salazar, MD[2]
[1]Hospital San José Santiago de Chile; [2]Hospital San Juan de Dios Santiago de Chile

Introduction: Gallbladder volvulus is an uncommon entity in clinical practice, first described by Wendel in 1898, with only approximately 500 cases reported since that date. It occurs mostly in older adult patients, with an average age of 77 years, it is more common among women, with a female:male ratio of 4:1. Its preoperative diagnosis is difficult (<10%), often being confused with other diseases, due to its similar clinical manifestations; leading many times to chronic symptomatic treatments, especially in countries other than Chile, where acute cholecystitis is not always a surgical indication.



Risk factors
Floating gallbladder
Elderly patients (visceral ptosis due to aging as result of the loss of adipose tissue and visceral elasticity)
Kyphoscoliosis
Gallstones (25-50%)
Physical efforts
Trauma
Pregnancy
Increased intestinal peristalsis

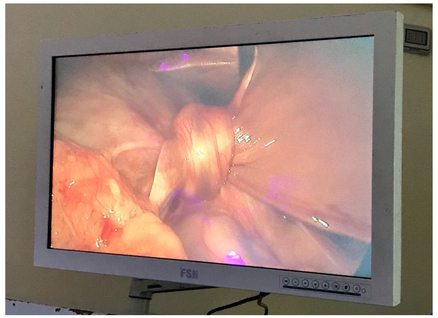
Objective: To report a clinical case of a gallbladder volvulus, diagnosed in the intraoperative in order to familiarize ourselves with this entity, to suspect it and offer the appropriate management.

Materials and Methods: Review of a clinical case, using the Hospital`s electronic clinical record. The review of the literature was made using Pubmed.

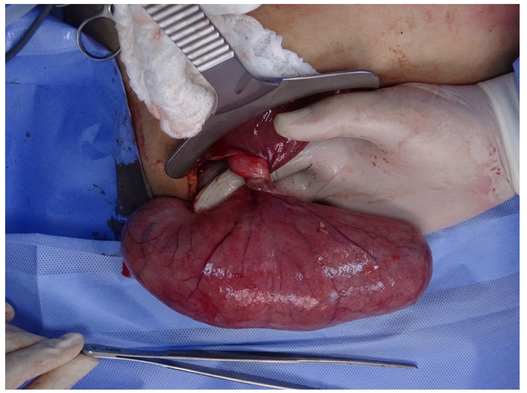
Case report: 73-year-old female patient who attended with acute abdomen pain; suspecting acute cholecystitis with choledocholithiasis. Initially, ERCP was performed to unblock the bile duct, confirming choledocholithiasis and releasing purulent content. A few days later, a laparoscopic exploration was performed, in order to execute a cholecystectomy, with the finding of a gallbladder volvulus. Due to its difficult handling and poor diagnostic certainty, it was necessary to convert it into an open procedure using a Kocher incision, achieving cholecystectomy without incident. The patient progressed satisfactorily with early discharge.

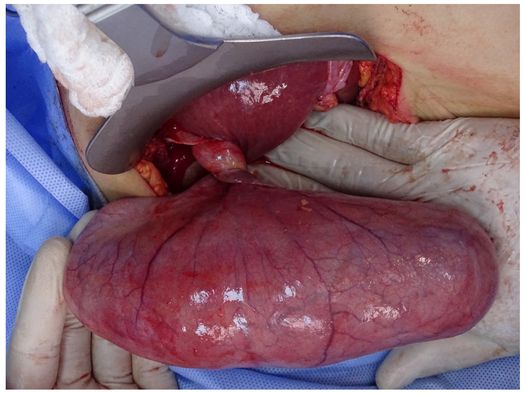


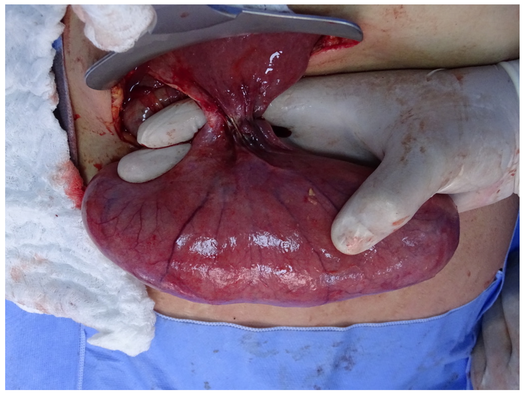
Abdominal computed tomography scan.

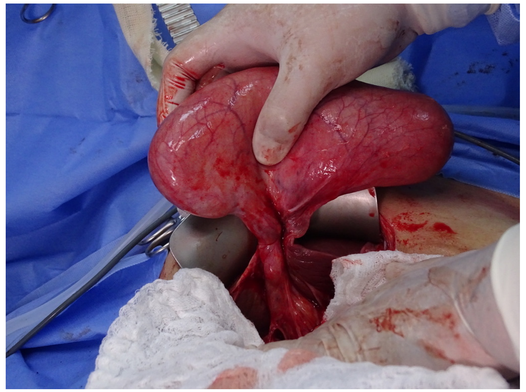


Laparoscopy: Closer inspection showed that the gallbladder was not adhered to the liver bed and had rotated approximately 180° in the clockwise direction









Laparotomy:

Intraoperative imaging showing the volvulus as well as the cystic duct and cystic artery after being detorted

Discussion and Conclusion:

- Gallbladder volvulus is an infrequent disease, therefore, a high suspicion is needed for its diagnosis.
- Clinical presentation and radiological findings are similar to acute lithiasic cholecystitis, and it must be surgically removed to avoid gallbladder perforation, biliperitoneum and shock.
- Laparoscopic cholecystectomy should be considered as the first therapeutic option.