The Impact of Laparoscopic Cholecystectomy on Pregnancy Outcomes in the United States

Memorial Healthcare System

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OBJECTIVE

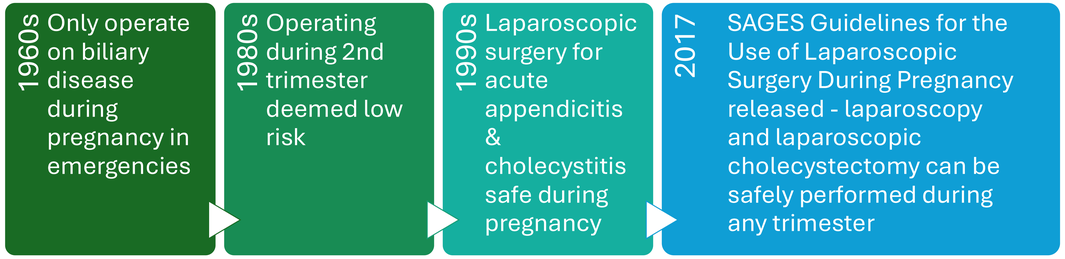
- Compare outcomes of cholecystectomy during pregnancy after widespread use of laparoscopy in the US

METHODS

- 2016-2020 Nationwide Readmission Database queried for all patients 18-45 yo undergoing cholecystectomy during pregnancy
- Primary Outcome: Stillbirth
- Secondary Outcome: Prolonged length of stay (pLOS) (>5 days)
- Univariate comparison
  - Laparoscopic vs Open surgery
  - Trimester
  - Age
  - Comorbidities
  - Hospital Characteristics
  - SES
- Multivariate logistic regression performed for each outcome

BACKGROUND

- 1/500 women will require non-obstetric abdominal surgery during pregnancy, most commonly



RESULTS

5,742 patients underwent cholecystectomy during pregnancy

5,477 (95.4%) laparoscopic cholecystectomy	Stillbirth occurred in 92 patients overall (1.6%)	pLOS experienced by 1,240 patients (21.6%)
	· No significant difference in still birth laparoscopic vs open · Risk factors · 2nd trimester · ≥ 2 comorbidities · Investor-owned hospitals	· Risk factors · Open surgery · ≥ 2 comorbidities

DISCUSSION

- This is one of the few nationwide studies of laparoscopic cholecystectomy and pregnancy since SAGES guidelines were updated 2021
- National Readmission database gives unique set of data that would otherwise be missed
- Benefits of laparoscopy during pregnancy are similar to those seen in non-pregnant patients
- Benefits of laparoscopy to the fetus
- Stillbirth rare overall
- pLOS associated with open surgery

RECOMMENDATIONS

- Laparoscopic cholecystectomy can be safely performed during any trimester of pregnancy
- Recognize risk factors for adverse outcomes

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