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Laparoscopic Cholecystectomy in Acute Cholecystitis in Septuagenarians

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Abstract

Background: Although Laparoscopic Cholecystectomy (LC) has been used successfully in the treatment of biliary lithiasis in the elderly, its effectiveness in Acute Cholecystitis (AC) of high age groups is still questionable.

Material and Methods: A retrospective research was performed with 410 LC patients operated by AC from January 2006 to December 2013 in the department of surgery of Hospital S. João. Two groups were considered: Group A - patients with 70 years old or older (N=91) and Group B - patients with less than 70 years old (N=319).The aim of the study is to compare morbidity and predictive factors for complications and conversion on these two groups.

Results: There was significant higher morbidity in group A than in B in the following items: surgical mortality (2.2% vs 0%; p=0.011), overall postoperative complications (25.3% vs 8.5%; p<0.001), reoperations (7.7% vs 1.6%; p=0.007).The hospital stay £ 4 days was lower in group A than in B (38.5% vs 49.8%; p=0.045). The perioperative complications diagnosed during the LC (4.4% vs 3.4%; p=0.371), injuries of bile duct (1.1% vs 0.9%; p=1.000) and conversion (15.4 vs 9.4%; p=0.125), although higher in the elderly group (group A), was not statistically significant. Overall, independent predictors for post-operative complications were age, pulmonary disease and gangrenous cholecystitis. In group A the only significant factors were renal disease and gangrenous cholecystitis; and in group B the only significant factor was pulmonary disease.

Conclusion: Although LC in septuagenarian is accompanied by greater morbidity than in youngers, it should be considered as a safe and efficient procedure, and the first choice in surgery of AC in the elderly. However, in complex cases, percutaneous cholecystostomy should be recommended in a first stage, followed a few days later by LC.

Abbreviations: LC - Laparoscopic cholecystectomy; AC - Acute cholecystitis; A - group A; B - group B.

Key words: laparoscopic cholecystectomy in septuagenarians, acute cholecystitis