

Early vs. Delayed Cholecystectomy for Acute Cholecystitis

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Assess, blame, & criticize

Early vs. Delayed Cholecystectomy for Acute Cholecystitis: The Considerations

- Is there a difference in perioperative morbidity and mortality?
- Is there a difference in course of disease?

- Is there a difference in cost?
- Is there a difference in open conversion?
- Is there a difference in convalescence time?
- Is there a difference in patient satisfaction?

Historically, and right up to today, delayed operation has been the predominant outcome.

Early vs. Delayed Cholecystectomy for Acute Cholecystitis:

Seven randomized trials (1975-2004)

(at least) Six meta-analyses (2003-2010)

Problems:

- Low patient numbers, even as conglomerate
- Heterogeneity of definitions
- Heterogeneity of study design
- Heterogeneity of endpoints

Bottom line:

- Early cholecystectomy is as safe as delayed
- Costs presumably lower with early
- Other benefits?

Early vs. Delayed Cholecystectomy for Acute Cholecystitis:

RCTs and meta-analyses

No.	Author	Journal	Year	Vol	Page	Study type
1	Papi et al.	Am J Gastroenterol	2003	99	147	meta-analysis
2	Lau, Lo, Patil, Yuen	Surg Endosc	2006	20	82	meta-analysis
3	Gurusamy, Samraj	Cochrane Rev	2006	4	na	meta-analysis
4	Borzellino et al.	Surg Endosc	2008	22	8	meta-analysis
5	Siddiqui et al.	Am J Surg	2008	195	40	meta-analysis
6	Gurusamy, Samraj, et al.	Br J Surg	2010	97	141	meta-analysis
7	McArthur, Cuschieri, et al.	Proc Roy Soc Med	1975	68	32	RCT
8	Lahtinen, Alhava, Aukee	Scand J Gastroenterol	1978	13	673	RCT
9	Jarvinen, Hastbacka	Ann Surg	1980	191	501	RCT
10	Norrby et al.	Br J Surg	1983	70	163	RCT
11	Lai, Kwong, Leung, et al.	Br J Surg	1998	85	764	RCT
12	Lo, Liu, Fan, Lai, Wong	Ann Surg	1998	227	461	RCT
13	Davila, Manzanares, Picho, et al.	Cirugia Espanola	1999	66	233	RCT
14	Johansson et al.	J Gastrointest Surg	2003	7	642	RCT
15	Kolla et al.	Surg Endosc	2004	18	1323	RCT

Early vs. delayed cholecystectomy for acute cholecystitis:

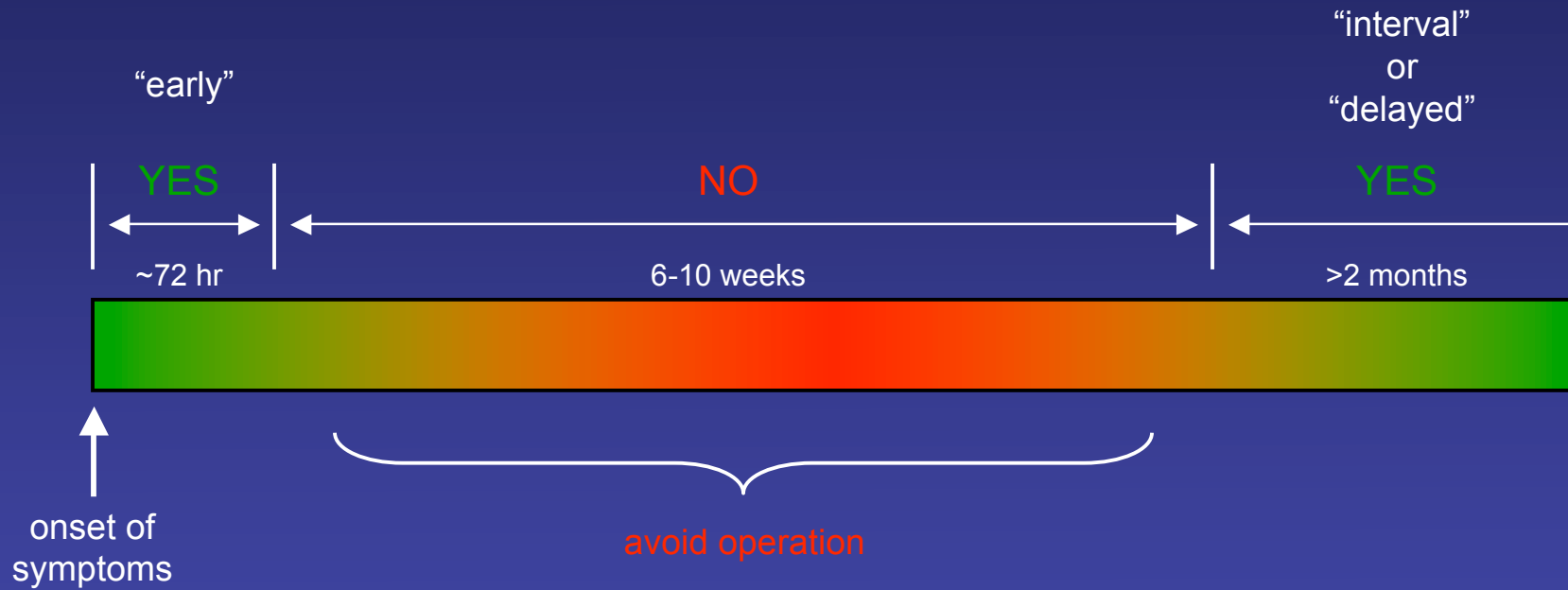
A survey of surgical textbooks

No.	Authors	Book	Year	preference	rationale
1	Kune, Gill	Maingot	1989	early	safety & efficacy
2	Morgenstern, Sackier	Cameron	1992	early	definitive solution, decreased cost
3	Zinner, Roslyn	Schwartz	1994	early	not discussed
4	Cuschieri	Cameron	1995	early	decreased recurrence, increased compliance
5	Sherry, Gadacz	Shackelford	1996	early	safety & efficacy
6	Nahrwold	Sabiston	1997	early	decreased LOS, decreased convalescence
7	Giurgin, Roslyn	Greenfield	1997	early	decreased cost, decreased recurrence
8	Ellison, Carey	Mastery of Surgery	1997	none	not discussed
9	Schwartz	Schwartz	1999	early	not discussed
10	Pitt, Ahrendt	Sabiston	2001	early	decreased cost
11	Strasberg, Vollmer	Cameron	2001	none	inadequate data
12	Hunter, Trus	Mastery of Surgery	2001	none	not discussed
13	Ellison, Carey	Mastery of Surgery	2001	none	not discussed
14	Pitt, Ahrendt	Sabiston	2004	early	decreased LOS, decreased recurrence
15	Oddsottir, Hunter	Schwartz	2005	early	definitive solution, one admission, decreased convalescence
16	Pitt, Ahrendt, Nakeeb	Greenfield	2006	early	decreased LOS, decreased recurrence
17	Margenthaler, Schuerer, Whinney	BMJ Clin Evid	2006	early	decreased LOS, decreased recurrence
18	Sawyer, Barkun, Smith, Chong, Tzimas	ACS Surgery	2006	early	decreased conversion, decreased LOS, decreased convalescence
19	Chari, Shah	Sabiston	2007	early	decreased conversion, decreased recurrence
20	Fried, Ferri, Hsu	Mastery Endoscop Lap Surg	2009	early	not discussed

Doctor books say: **early**

The \$ slide...

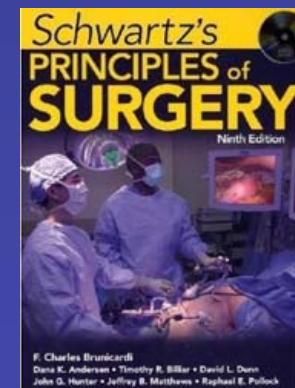
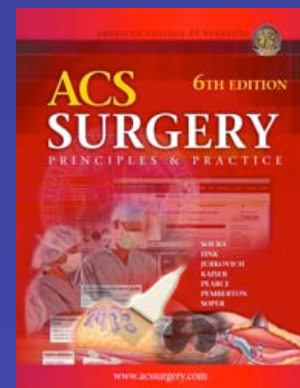
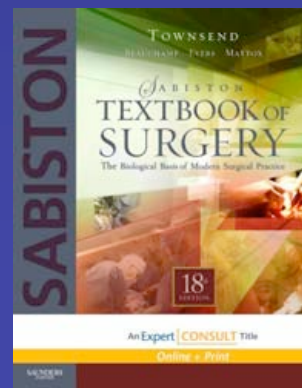
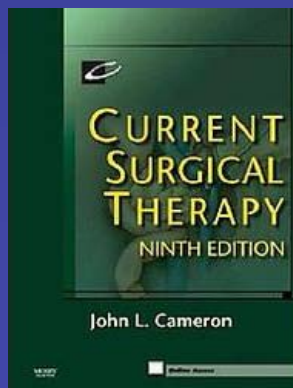
Acute cholecystitis: when to operate



ABS oral exam: “I would operate early if possible”

Books

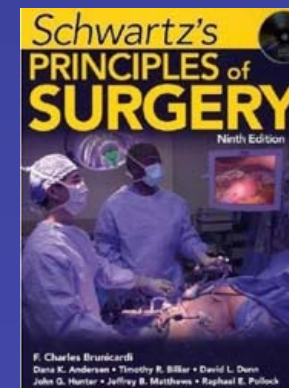
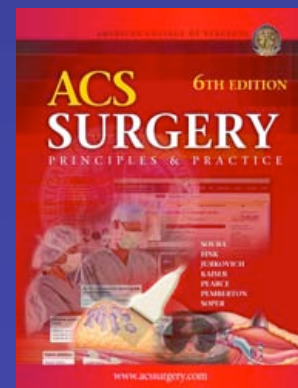
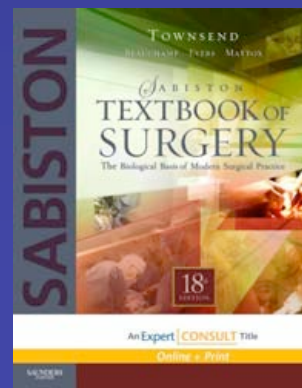
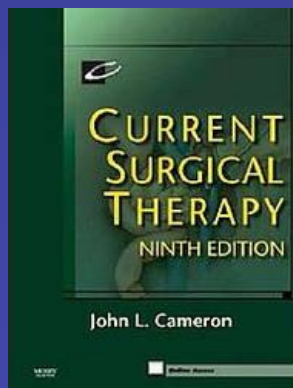
“Medical textbooks are the repository of accepted knowledge”



Books

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Medical textbooks are the repository of opinion

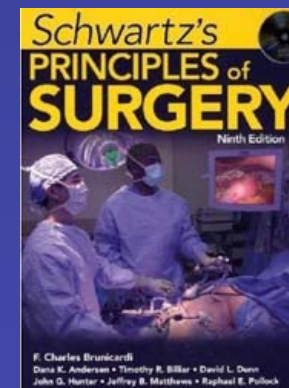
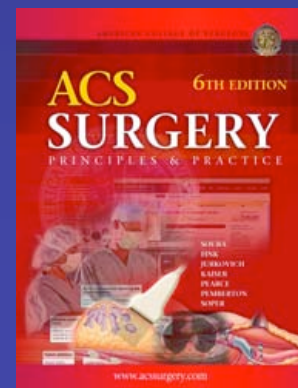
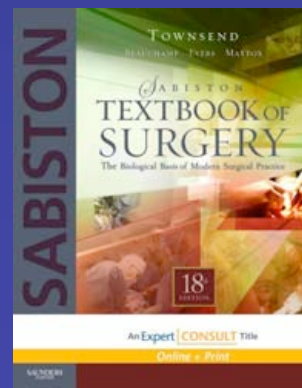
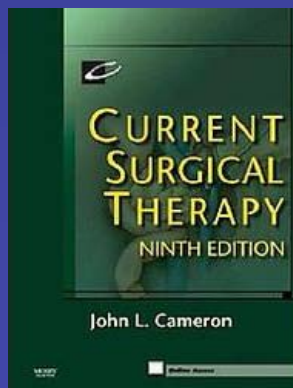


Books

“Medical textbooks are the repository of accepted knowledge”

Medical textbooks are the repository of opinion

A medical textbook is a collection of essays which a time-pressured editor tries to extract from senior staff, who usually delegate the writing thereof to junior staff or residents.



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