

Gallbladder Disease

The gallbladder is a thin-walled sack about the size of a hen's egg. It is attached under the liver in the right upper portion of the abdomen. Normally, the gallbladder is filled with bile, a fluid that's produced by the liver. When we eat food—especially greasy food—the bile is emptied into the digestive tract where it helps the digestive process. With gallbladder disease, the normal amounts of bile and the other chemicals inside the gallbladder become imbalanced. This imbalance can cause the cholesterol within the bile to become hard, forming gallstones. Gallstones can be smaller than a pea or larger than a golf ball. About 10 percent of Americans develop gallbladder disease.

The most common symptom associated with gallstones is pain in the upper right area of the abdomen. It is described as a continuous, cramping dull ache. The pain may radiate to the center of the upper abdomen, lower chest, or right shoulder blade. Nausea or vomiting may also occur. Gallbladder attacks may be mild or severe, seldom or frequent. Severe pain is usually the result of a stone getting stuck in the outlet while the gallbladder is contracting. Whenever there is a blockage of bile flow, there is a risk of infection. This typically causes fever, sweats, or chills along with the pain. However, most often there are no symptoms at all, and gallstones may be discovered unexpectedly during tests to examine abdominal pain or routine ultrasound exams to monitor pregnancy.

The risk for having gallbladder disease tends to be higher for women—especially for those who have had several pregnancies, are taking estrogen after menopause or who take high-dose birth control pills. For both men and women, eating a high-fat diet, being overweight or losing weight rapidly are also significant risk factors for the disease. Gallbladder disease seems to run in families, too.

There is no sure way to prevent gallstones but you can reduce your risk by maintaining a healthy weight and by exercising regularly. Women who are taking estrogen should consult with their medical professional about the risk and benefits.

If you or your medical professional suspect that you may have gallbladder disease, special gallbladder tests will likely be ordered. An abdominal ultrasound is the best test to confirm gallstones. It's painless, very accurate, and quite safe. A gallbladder scan or blood test may also be necessary.

If gallstones do not cause symptoms, then treatment is not necessary. Only 1 to 4 percent of people who have gallstones develop symptoms each year. In these individuals, the treatment of choice is surgery to remove the gallbladder.

Gallbladder removal, or cholecystectomy, is one of the most common operations done today. Most of these operations are now performed by laparoscopy—a surgery that requires small incisions in the abdomen for placing the laparoscope instrument. Laparoscopic gallbladder surgery is safe and effective. Most patients can return to their normal activities within 10 to 14

days. The good news is that, after the gallbladder is removed (along with the stones inside), symptoms usually do not return. After surgery, bile flows from the liver (where it is produced) through the common bile duct and into the small intestine. Because the gallbladder is absent, bile no longer can be stored between meals. In most people, this has little or no effect on digestion.

If you are making the decision about whether or not to have surgery to treat chronic gallstone attacks, you can learn more about your choices and be better prepared to work with your medical professional by visiting our member Web site *members.kp.org*. Click on the “Get health advice” tab and go to the “Health encyclopedia.” Look up “Gallbladder disease” and use the “Health Tools” to find specific information that will help you make the best decision.

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For more health information ...

- Connect to our Web site at *members.kp.org*.
- Check your *Kaiser Permanente Healthwise Handbook*.
- Listen to the Kaiser Permanente Healthphone at 1-800-33-ASK ME (1-800-332-7563). For TTY, call 1-800-777-9059.
- Visit your facility’s Health Education Department for books, videos, classes, and additional resources.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other medical professional. If you have persistent health problems, or if you have additional questions, please consult your doctor.