

Gall bladder laser surgery gets high marks all around

By Amy Booth

Jenny Jennings is one of approximately 20 million Americans who suffers from gall bladder disease in the United States.

She recently underwent a new, less painful and less costly procedure for gall bladder removal at Froedtert Memorial Hospital, which enabled her to return to her St. Charles, Ill. home the next day and return to work about a week later.

"The new procedure is called laparoscopic cholecystectomy and is both safe and effective," said Dr. Constantine Frantzides, an assistant professor of surgery at the Medical College of Wisconsin, who has been instructing faculty physicians in the technique since last year.

Before the new surgery was made available, removing the gall bladder required on average a six-day hospitalization. Full recovery took about four weeks. Patients experienced considerable pain and went home with a 4- to 6-inch scar and a sizable hospital bill.

Jennings said Frantzides and the new technique came highly recommended.

"I chose to have laser surgery over the traditional procedure after a family friend had to be taken in for emergency gall bladder surgery. I would rather have it taken care of now, because if you're admitted for emergency gall bladder surgery you have no choice on what methods are used," the 28-year-old Jennings said.

According to Frantzides, the procedure requires only three tiny punctures in the abdomen, where instruments are introduced, and a very small incision near the naval, through which the identification of other vital organs is possible and the compressed gall bladder is removed.

Rather than view directly through a laparoscope as is done with traditional laparoscopy, Frantzides' surgical team inserts a small thin scope through the incision. This enables them to view the surgical field on two video screens during the entire procedure.

"We decided the best area to extract the gall bladder is the naval because there you have a small incision, and at the same time the skin is more flexible than any other part of your body," Frantzides said.

"One of the advantages of this technique is aesthetically there is virtually no scarring," Frantzides

said.

The gall bladder is collapsed and eventually removed through the naval incision.

About half of gall bladder disease patients who qualify for surgery can have the procedure done on an outpatient basis.

Frantzides said 90 percent of his patients go home the following morning. He said most patients don't want to leave right after the surgery because they either live more than a couple of miles away, or they feel more safe in the hospital. Frantzides said others are "ready to go home... ready to eat and eager to get back to work."

As with any surgery, complications are possible. After the procedure, some patients experience "a slight post-operative malfunction of the bowel." Frantzides said this patient will not be able to eat solid foods, therefore they're admitted, and put on intravenous fluids. About 10 percent of patients might also experience vomiting, not due to the surgery, but due to the anesthetic sensitivity, Frantzides said.

"All patients are informed prior to surgery that there is a possibility of having to revert to traditional open cholecystectomy due to patient anatomy or other complicating indications," Frantzides said.

According to Frantzides, operative costs are also less because his team of surgeons hasn't increased the fee. They've kept the same rate as the traditional surgery. Hospital costs are minimal and the patient's stay is short.

The traditional surgery lasts about under 90 minutes whereas the laparoscopic technique can last up to 2½ hours. "The length of the surgery shouldn't be the issue, the patient's health should be," Frantzides said.

The length of the procedure is the only minor inconvenience, but Frantzides said he'd rather spend the time now correcting the problem rather than waiting for a second or third gall bladder surgery.

"Laparoscopic surgery is revolutionary and it's here to stay. I'm sure in the near future many internal surgical procedures will be done this way," Frantzides said.

Just ask Jennings, the patient with a smile on her face:

"I feel great... haven't experienced a lot of pain, and the best thing of all is I'll be back to work soon," she said.