

PARAMETERS FOR SELECTIVE INTRAOPERATIVE CHOLANGIOGRAPHY IN THE DIAGNOSIS OF COMMON BILE DUCT STONES

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In patients with gall bladder calculosis, the complication as common bile duct stones (CBDS) occurs in 10%-12% of cases and represents a serious disease which has to be recognized and treated in time. Diagnostic procedure that verifies the presence of CBDS is intraoperative cholangiography (IOC). Despite simplicity and safety of this method, solving technical and organizational details before its usage is required, and some percentage of failure and complications tend to occur. Hence, there is still a controversy whether this procedure should be used non-selectively or selectively.

The aim of our study was to examine in which cases of gall bladder calculosis IOC has to be used.

In a retrospective study, 150 patients operated for CBDS were analyzed. We formed a simple and unique scoring system with five parameters for prediction of this disease: diameter of common bile duct >8 mm, gall bladder calculosis <5 mm, high serum level of bilirubin, elevated levels of ALP and ALT in serum.

The value of scoring system was confirmed in a prospective group of 100 patients, operated for gall bladder calculosis and subjected to IOC. After scoring, all patients were divided into three risk groups for CBDS presence: low, medium and high.

Comparison of results for suspected CBDS (confirmed by scoring) and existing CBDS (confirmed by IOC) has demonstrated a high level of scoring system precision and its practical usage value in the election of patients with gall bladder calculosis who need IOC. *Acta Medica Mediana 2015;54(3):19-26.*

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