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Laparoscopic cholecystectomy: rate and predictors for conversion.

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Abstract

Laparoscopic cholecystectomy (LC) was attempted in 847 patients, 823 (97.2%) were completed laparoscopically and 24 (2.8%) had to be converted to open cholecystectomy (OC). Acute cholecystitis was the commonest reason for conversion (13 out of 24 patients). Patients who had acute cholecystitis are five times at risk for conversion to open than other patients with non-acute cholecystitis ($p < 0.001$). Age and sex were not statistically significant predictors for conversion. There were no mortalities and no major bile duct injuries in our series. These data confirms the safety of LC, identify factors which predicts conversion to OC and may be helpful in selecting patients for day care ambulatory LC