

## The Diagnosis Of Gallstones, Complications And Treatment

By using an ultrasound scanner we can detect the gallstones painless and quick. To test the liver's function blood samples are taken. Other useful tests are: CT- scan and a MRI scan. CT -means computerised tomography and slices the body with X-rays. MRI-means magnetic resonance imaging and pictures of the internal organs without X-rays, is very useful for checking the bile ducts. Oral cholecystogram is an X-ray examination which shows if the gallbladder is capable of contraction. ERCP meaning endoscopic retrograde cholangio-pancreatography is used to determine exactly if the patients has gallstones in the bile ducts. Under sedation an endoscope is introduced down the gullet and into the duodenum and a very thin tube is placed into the duct at the place where it enters the duodenum. The duct is injected with a dye and after X-raying one can see if there are gallstones. So, this way the gallstones may be removed. Using medicines a specific type of gallstone can be dissolved with dissolution therapy. If the patient is not willing to have an operation than the alternative is to use ursodeoxycholic acid although by using this method it may happen that the gallstone is coming back. Gallstones have to be of a small to medium size and to show up on plain X-rays and the gallbladder to contract. Lithotripsy is a technique that uses sound energy, but it hasn't been used so much on gallstones, the fragments will still need to be removed by ERCP or dissolution therapy. Cholecystectomy is an operation that removes the gallstones and the gallbladder together. If there are removed only the gallstones, there are high chances that gallstones to be formed once again. In almost all cases the removing of the gallbladder is done by laparoscopic and keyhole surgery. Usually those operations allow the patient to go home after one day in the hospital and to return to normal activities. Laparoscopic involves four cuts in the abdomen of 1 cm and the use of a tiny camera to see the gallbladder, through the other cuts other instruments are placed in the abdomen. Traditional cholecystectomy involves a cut of 9 and 18cm long, but in this case the patient will have to stay in the hospital for at least five days and won't be able to return to work for six to eight weeks. Complications after gallbladder surgery are very rare and with no long term effects. The patients are feeling well after the operation and the pain has disappeared, so they no longer have to avoid fatty foods. What to do at home when an attack of pain repeats: Painful attacks are to be treated with painkillers. Keeping a low fat diet and placing something warm on the pain spot are also helpful methods. If you have gallbladder and no symptoms appear then no treatment is required, there are also many alternative treatments which can be applied, if they are not effective surgery is highly recommended.

### About the Author

Describes the services of Cape Cod Hospital and Falmouth Hospital, including programs, support groups, heart services, senior.

Source: <http://www.productsherbal.com>