

GALLBLADDER SURGERY: Similar but different than the human situation



Overview—“I don’t understand what the gallbladder and its problems are; please help me understand the organ, its condition and the treatments.”

The gallbladder in dogs and cats is somewhat similar to the gallbladder in humans. It is a balloon-shaped structure connected by tubes (“ducts”) from the liver and to the small intestine (duodenum); liquid bile, made by the liver, is moved into the gallbladder for storage (approximately one-half ounce when full). Daily as the intestines need it, the gallbladder contracts and squeezes bile into the beginning of the small intestine/duodenum to mix with the digesting food coming out of the stomach. The bile chemicals help digest the fat in the food that was eaten.

Unlike in people, gallstones are uncommon in dogs and cats. More common is the condition called a “mucocele”; this develops when the bile becomes too thick to be squeezed out of the gallbladder. The longer it sits in the gallbladder, the thicker and dryer it gets until the gallbladder feels like a rubber ball. Over time, the wall of the gallbladder is compressed, gets thinner and eventually may rupture allowing bile material to leak into the abdomen. This results in bile “peritonitis”, a serious condition often requiring emergency surgery to treat. When a mucocele is detected prior to rupture, when it is just causing an animal to feel sick and uncomfortable, the gallbladder can be removed surgically more safely.

Other causes of gallbladder problems include gallbladder trauma/rupture (which is treatable with surgery), gallbladder tumors (which may be treatable with surgery), bile sludging (which may be treatable with medication), gallstones (which are treatable with surgery), and bile duct obstruction during an episode of pancreatitis (a painful inflammation the nearby pancreas organ that causes swelling of the bile duct area and prevents bile from exiting into the small intestines; this is most commonly treated with medicine and supportive care.) The most effective/lowest risk test for gallbladder diagnoses is the abdominal ultrasound; at times, multiple ultrasound studies over several days may be beneficial to track positive or negative changes.

“Why is gallbladder surgery being recommended for my pet?”

Removing the gallbladder in the case of mucocele or traumatic rupture, or in some patients with tumors, is an effective treatment with good results. In many of these cases it is the only treatment to solve the medical problem. The safety of the anesthesia and surgical procedure is most dependent upon how sick the patient is at the time of surgery. Those animals who have been vomiting and off food for days may need more dramatic supportive hospitalized care before/during/after gallbladder surgery.

“What options do I have to treat my pet’s condition?”

As mentioned above, there are different abnormalities that develop with the gallbladder. Some conditions will benefit from medicine and supportive care (IV fluid, special feeding, medications) and diagnostic testing will point to situations when this is the best starting point. In other cases, diagnostic testing suggests either option (medicine or surgery) with different risks and benefits, so a choice is open for consideration. And in some patients, it is clear from diagnostic tests that surgery is the only logical route to solve the gallbladder problem before a patient’s condition worsens (in hours or days).

Many animals feel too sick-to-their-stomach to eat properly, and healing can be difficult without nutrition in these sick patients. Because of this, commonly added to treatment for any gallbladder problem is special feeding of liquified food through tubes. These can be placed with sedation (through the nose and down into the esophagus) or with brief anesthesia (thru a small surgery on the side of the neck and into the esophagus).

“What postoperative complications do I need to know and understand when considering this surgery?”

Complications depend somewhat on how sick the patient is before surgery and what problem the gallbladder has that needs treatment. A common situation after gallbladder surgery is feeling too sick to eat, take liquids or take their necessary medications; if this goes on for more than 1-2days, we may strongly advise placement of a tube for feeding liquified food and giving medications. (This is especially important if the patient has not eaten properly for days/weeks before surgery.)

Specific surgical complications are excessive bleeding that may need transfusion to support; leakage of bile from gallbladder ducts or the site of surgery on the gallbladder that may need an additional surgical procedure to diagnose and correct; inflammation of the pancreas (a delicate organ very close to the gallbladder) that may need hospitalized supportive care and medications to manage; and infection in the abdomen (“peritonitis”) from bacteria in the gallbladder/bile that may need medicine or surgery to manage.

“Are there situations when the surgical outcome is not what we hoped it would be?”

The majority of patients who have their gallbladders removed for mucocele, trauma or stones diagnosis will recover without concern. When a patient has to have emergency surgery for a ruptured gallbladder or is very sick with their gallbladder disease for days/weeks, postoperative recovery will be slow and require hospitalized supportive care, but they can make a full recovery. For those patients who are diagnosed with a tumor of the gallbladder, this may be a malignant disease that will not be fully treated/cured with surgical removal. The type of tumor (based on biopsy) will determine the prognosis if this abnormality is identified at surgery.

“How is my pet’s life and lifestyle likely to change after this procedure?”

It is uncommon to have nutritional changes needed for patients who had their gallbladder removed. Lifestyle will resume normal after full recovery.

“Are there things I can do to prepare myself, my home and/or my pet for this procedure?”

Most patients having gallbladder disease and then surgery will be feeling poorly after surgery. Many will not eat or drink. Have a plan for good TLC at home with comfortable/warm bedding location, easy access to places to urinate/defecate, jars of meat babyfood, scrambled eggs or other enticing foods to promote appetite. If your pet will be having a feeding tube placed, you may need a blender for preparing food.

It is common for these patients to need veterinary support after surgery, either inpatient at a 24hr hospital or outpatient with your primary care veterinary team. Plan for transport and time to make this possible.

Outpatient surgery and anesthesia can be uncomfortable, painful, disorienting, and frustrating experiences for animals; watching your pet work through the early postoperative period and recover from anesthesia and pain medications can be worrisome, scary and frustrating for pet owners. The vast majority of the time this period of difficulty is brief, and *your pet is actually more comfortable and secure at home with you*. Sometimes it doesn’t feel like that at two in the morning when your pet is anxious and not consolable, and you are unsure of what to do. You always have the option of transporting your pet to a 24-hour veterinary facility postoperatively. If you do not want to have your pet home in the first few days postoperatively, please advise your primary care veterinary staff. They will provide contact information for a local 24-hour veterinary facility and help get an estimate for the ongoing care.

It is important that you have proper expectations about this procedure; your experience and you pet’s outcome will benefit greatly. Please discuss this information with your veterinarian when working through the decision-making process regarding **Gallbladder Surgery**.

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