



Patient & Family Guide
2019

Gallstones

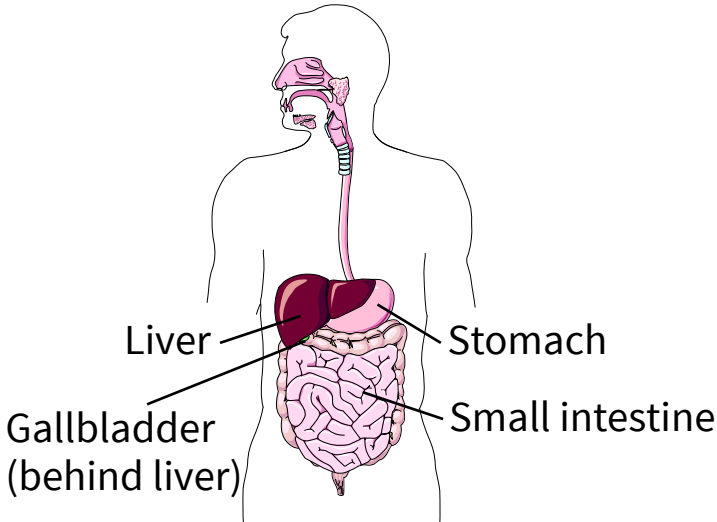
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Calculs biliaires (FF85-2087)



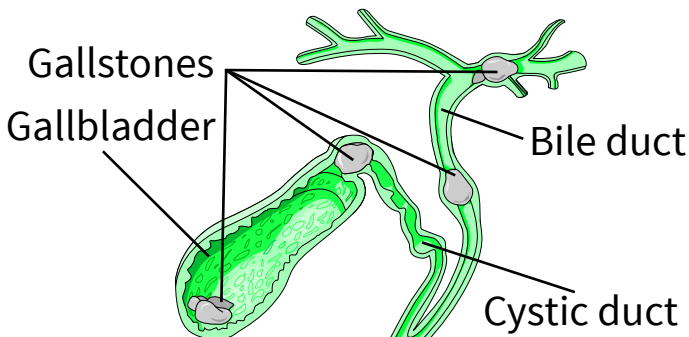
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Gallstones

The gallbladder is a small sac in the upper right part of the abdomen (stomach area). It stores bile made by the liver. Bile helps you digest fat.



Gallstones start as small pieces and can get bigger over time. They can cause problems if they block the tubes that bile needs to travel through.



What causes gallstones?

Gallstones may form when the chemicals in the gallbladder are out of balance.

There are 2 main types of gallstones:

- Cholesterol gallstones: when there is too much cholesterol in the bile.
- Pigment gallstones: when the bile has too much bilirubin.

We don't know why these imbalances happen.

Gallstones are more common in:

- › people with a family history of gallstones
- › people with obesity, especially women
- › women taking oral contraceptives (birth control pills)
- › women who have been pregnant
- › people who have recently lost a lot of weight
- › men who have quickly lost and then gained weight
- › people who are sedentary (tend to sit a lot and not get exercise)
- › people who eat a lot of fatty foods
- › people with diabetes

What are the symptoms?

- Most people with gallstones don't have any symptoms. This is because the stones stay in the gallbladder and don't cause problems.
- Sometimes gallstones lead to cholecystitis (inflammation of the gallbladder). This is called a gallbladder attack.
 - › The main symptom is sudden pain that quickly gets worse. The pain may be on the right side of the body, just below the ribs, between the shoulder blades, or in the right shoulder.
- Other symptoms include:
 - › nausea (feeling sick to your stomach)
 - › vomiting (throwing up)
 - › sweating
 - › restlessness (having trouble settling down, feeling like you need to keep moving)

If you have a gallbladder attack:

- Rest until you feel better.
- When you eat, start with clear fluids such as water, tea, broth, Gatorade[®], or Jell-O[®].
- If you are OK with fluids, you can try eating small amounts of plain foods such as rice, cooked cereals, clear soup, bread, crackers, baked potatoes, bananas, or applesauce. **Do not eat fried or spicy foods, or foods that are high in fat.**
- 2-3 days after your pain is gone, go back to eating your usual foods. Eat smaller amounts more often.
- Take pain medication as prescribed by your family health care provider, as needed.

How are gallstones diagnosed?

In many cases, gallstones are found by accident through blood tests, X-rays, ultrasounds, or CT scans.

How are gallstones treated?

Gallstones are only treated if they have:

- › caused inflammation
- › blocked the bile duct
- › moved from the bile duct into the intestines

Diet

We recommend a balanced diet with regular meals. Avoiding foods high in saturated fat can help prevent gallstones from forming.

Tips to avoid saturated fat:

- Check food labels to see how much fat is in one serving. Choose foods that have the lowest % Daily Value for total fat. Look for a % Daily Value of less than 5% fat.
- Broil, bake, barbecue, steam, poach, or microwave food instead of frying.
- Limit the amount of fat added to foods. Use less oil when cooking. Use less butter, salad dressing, margarine, and mayonnaise.
- Eat smaller portions of meat, poultry, and fish. A serving is the size of a deck of cards. Trim all the fat you can see before cooking.

Many people with gallstones have certain foods that trigger their pain. Some examples of common triggers are:

- › eggs
- › pork
- › fried, fatty, or spicy foods
- › cream, butter, cheese

Surgery

If you have repeated gallbladder attacks, you may need to have your gallbladder removed (cholecystectomy). This is usually done with laparoscopic surgery. A laparoscopic surgery involves several small incisions (cuts) and the surgeon uses a camera to see inside the body. If the gallbladder is badly inflamed, you may need open surgery. An open surgery uses one larger incision to let the surgeon remove the gallbladder.

ERCP (Endoscopic Retrograde Cholangiopancreatography)

If you can't have surgery, you may have an ERCP. In this procedure, a flexible fibre-optic camera (endoscope) goes into your mouth, down your throat, through the digestive system, and into the gallbladder. An electrically heated wire is used to widen the opening of the bile duct. The stones are then removed or left to pass into the intestine. You will be given local anesthetic (numbing medicine on part of your body so that you don't feel pain).

What are the possible risks of gallstones?

- **Biliary colic:** this is when a gallstone gets stuck in the opening of the gallbladder and will not easily pass through.
- **Infection:** symptoms of an infection include fever and chills. If this happens, the gallbladder is usually removed.
- **Jaundice:** if a gallstone leaves the gallbladder and gets stuck in the bile duct, it may block bile from passing into the intestine. The bile then passes into the bloodstream, causing jaundice (yellow skin).

If you have these symptoms, you may need surgery to remove your gallbladder.

Can I live without my gallbladder?

Yes. The liver makes enough bile to digest a normal diet. Bile will flow from the liver, through the hepatic duct, to the small intestine.

You may have diarrhea (loose, watery poop) for a while. The length of time will vary from person to person. Your body no longer has a place to store bile and it can be hard for your body to absorb extra fluid. The extra fluid flows out through the bowel, causing diarrhea. Over time your body will learn to produce less bile and your bowel movements will go back to normal.

Call your family health care provider or go to the nearest Emergency Department if you have:

- › more pain
- › vomiting that doesn't stop
- › fever over 38.5° C (101.3° F)
- › a swollen belly and/or your belly is firm to touch
- › any symptom out of the ordinary that you are worried about

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The information in this pamphlet is to be updated every 3 years or as needed.