

# Chronic cholecystitis

thumb|250px|Chronická rekurentní cholecystitida thumb|250px|Cholecystolitiáza na ultrasonografii  
thumb|250px|Cholecystolitiáza

- It occurs either by gradual development or is the result of acute cholecystitis once or repeatedly,
- each attack of cholecystitis increases the risk of life-threatening complications.

## Pathological finding

- Wall fibrosis with inflammatory exudation, the wall is thickened, stiffer, the mucosa is red, sometimes covered with ulcers, sometimes completely absent,
- retraction occurs with longer duration → a picture of a wrinkled gallbladder,
- in cystic obstruction → hydrops – bile discolors after absorption of bile pigments, calcium salts fall out and give the gallbladder a milky color,
- salts can also be deposited in the wall → „porcelain gallbladder“.

## Etiology

- Microbial infections, chemical irritation and metabolic causes apply.

## Clinical picture

- It corresponds to the difficulties arising from lithiasis,
- **biliary dyspepsia** – abdominal pressure, episodic local or diffuse abdominal pain, heartburn, anorexia, flatulence, nausea, steatorrhea,
- attacks of repeated biliary colic.

## Diagnosis

### Anamnesis

- Cholelithiasis,
- repeated attacks of biliary colic, past acute cholecystitis.
- dyspeptic problems

### Physical examination

- It usually does not contribute to the diagnosis,
- in the case of an acute exacerbation, Murphy's sign may be positive.

### Further examination

- Increased sedimentation and leukocytosis in gallbladder empyema,
- **the basic examination is USG,**
- X-ray – pathological finding on the gallbladder – loss of function, reduced concentration and evacuation ability.

## Complication

- Mainly acute exacerbations, cholangitis with hepatic parenchyma, formation of biliodigestive fistulas, development of liver or subfrenic abscess, which may cause pancreatitis.

## Therapy

- Conservative - pain control, anticholinergics, antispasmodics, infection prevention, adjustment of water and electrolyte balance, stomach decompression as needed, pancreatic enzyme replacement as needed, possibly vitamins,
- causal treatment is only surgery → cholecystectomy,
- **Neither baths nor antibiotics stop the process on the gallbladder.**

## Links

## Related articles

- Acute cholecystitis

- Infectious cholangitis

## External links

- Chronická cholecystitida - video na youtube.com (<https://www.youtube.com/watch?v=aU1IWPzUZgY>)

## Source

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## Použitá literatura

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Kategorie:Vložené články Kategorie:Chirurgie Kategorie:Vnitřní lékařství Kategorie:Gastroenterologie  
Kategorie:Patologie