Gallstones

Information for the public
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About this information

NICE guidelines provide advice on the care and support that should be offered to people who use health and care services.

This information explains the advice about gallstones that is set out in NICE guideline 188.

Does this information apply to me?

Yes, if you are aged 18 years or over and have gallstones or have had gallstones in the past, you have symptoms that might mean you have gallstones, or you have a gallbladder infection caused by gallstones.

It does not cover gallbladder infections caused by serious illness or injury.

Gallstones

Gallstones are stones that can form in the gallbladder and the bile duct. The gallbladder and bile duct are part of the digestive system that makes bile, which helps break down fats. The two organs are connected, so sometimes gallstones can move from the gallbladder to the bile duct. The cause of gallstones is unknown for most people. They are very common, and do not cause symptoms or problems for most people.
But sometimes gallstones can make you feel or be sick, and cause stomach, back and shoulder pain. If the gallstones are not treated they can cause problems with the liver such as jaundice (yellowing of the skin), and serious infections in the gallbladder, bile duct and pancreas.

Your care team

A range of professionals who specialise in different areas of treatment or support may be involved in your care. These could include specialist doctors such as gastroenterologists (doctors who specialise in the digestive system) and radiologists (doctors who use technology such as X-rays to diagnose illnesses), specialist nurses, surgeons and GPs.

Working with you

Your care team should talk with you about gallstones. They should explain any tests, treatments or support you should be offered so that you can decide together what is best for you. Your family or carer can be involved in helping to make decisions, but only if you agree.

You may also like to read NICE's information for the public on patient experience in adult NHS services. This sets out what adults should be able to expect when they use the NHS. We also have more information on the NICE website about using health and social care services.

Some treatments or care described here may not be suitable for you. If you think that your treatment does not match this advice, talk to your care team.

Diagnosing gallstones

If your doctor thinks you may have gallstones, they should offer you a blood test to check how your liver is working, and an ultrasound scan of your abdomen. Depending on the results of these tests, you might also be offered other tests.

If your doctor thinks that your symptoms could be caused by a problem other than gallstones, they should refer you for more tests.

Treating gallstones in the gallbladder

If you have gallstones in your gallbladder but you don't have symptoms, your doctor should reassure you that you do not need any treatment. If the gallstones are causing you problems, you should be offered keyhole surgery to remove your gallbladder. This is because your symptoms are
likely to come back after any other treatment for gallstones. If you need surgery, your doctor will be able to talk with you about what is involved. Depending on your social and medical circumstances, you may be able to go home on the same day you have your surgery.

If gallstones have caused an infection in your gallbladder, you should be offered surgery to remove it within a week of the infection being diagnosed.

Some people who have other conditions or illnesses may not be well enough to have their gallbladder removed. Your doctor should offer surgery again when you are well enough. Very rarely, normal alternatives to surgery (such as antibiotics) won't work, and if this is the case you may be offered a procedure to drain infected fluid from your gallbladder.

**Treating gallstones in the bile duct**

Gallstones should always be removed if they are in the bile duct. Normally, an endoscopy (inserting a thin, flexible tube down your throat to perform surgery inside your body) is used to remove the gallstones in your bile duct, and keyhole surgery is used to remove your gallbladder. The endoscopy may happen at the same time as the surgery or at a different time. You may be offered keyhole surgery to remove both the stones and the gallbladder instead. Your doctor will talk to you about what is involved and how long you need to stay in hospital.

Sometimes gallstones in the bile duct can't be removed with an endoscopy. If this is the case, you should be offered a procedure to help fluids drain out of your bile duct. This should happen at the same time as the endoscopy. This procedure should only be used until the gallstones can be removed completely.

**Avoiding food and drink that trigger your symptoms**

People with gallstones often find that some kinds of food and drink trigger their symptoms. Avoid any food or drink that triggers your symptoms until after your gallbladder or gallstones are removed. After this, you should be able to eat and drink normally.

After you have recovered from having your gallbladder or gallstones removed, you should contact your GP if you have any symptoms (including symptoms you didn't have before) after eating or drinking.
Questions to ask about gallstones

These questions may help you discuss your condition or the treatments you have been offered with your healthcare team.

**Finding out what’s wrong (diagnosis)**

- Can you tell me more about the tests/investigations you’ve offered me?
- What do these tests involve?
- Where will these be carried out? Will I need to have them in hospital?
- How long will I have to wait until I have these tests?
- How long will it take to get the results of these tests?

**About your condition**

- Can you tell me more about gallstones?
- Why have I got gallstones?
- Are there any support organisations in my local area?
- Can you provide any information for my family/carers?
- Would it help my condition if I made some changes to my diet?
- Are there particular kinds of food and drink that normally cause symptoms in people with gallstones?

**Treatments**

- Can you tell me why you have decided to offer me this particular type of treatment?
- What are the pros and cons of this treatment?
- What will it involve?
- How will it help me? What effect will it have on my symptoms and everyday life? What sort of improvements might I expect?
Are there any risks associated with this treatment?

When should I start to feel better and what should I do if I don't start to feel better by then?

What are my options for taking treatments other than the one you have offered me?

What will happen if I choose not to have the treatment you have offered?

Is there some other information (like a leaflet, DVD or a website I can go to) about the treatment that I can have?

Sources of advice and support

- British Liver Trust, 01425 481320
  www.britishlivertrust.org.uk

- CORE: Fighting gut and liver disease
  www.corecharity.org.uk

You can also go to NHS Choices for more information.

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

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Accreditation