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Comparative analysis of management of acute cholecystitis during the SARS-CoV-2 coronavirus pandemic

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About the Study

Introduction: COVID-19 infection has spread throughout the world and is considered a pandemic. Since its appearance, the number of non-COVID-19 patients admitted to hospitals has decreased and patients differ care for emergency diseases. We analyze the impact of the SARS-CoV-2 coronavirus pandemic on the management of acute cholecystitis.

Material and methods: Retrospective observational study that includes all patients diagnosed with acute cholecystitis during the SARS-CoV-2 coronavirus pandemic (period between March 11th and June 21st, 2020) and patients diagnosed with acute cholecystitis in the same period, the previous year in our center. Patient's features, management, postoperative complications and mean hospital stay were compared.

Results: In 2020, 19 patients with acute cholecystitis were diagnosed compared to 21 who were registered in the same period in 2019. The mean number of days from symptoms onset in 2020 was 2.42±1.8 days, while in 2019 it was 3.5±3.1 days (p=0.32). The percentage of cholecystectomies, percutaneous cholecystostomies and conservative management was similar in both periods. Among patients who underwent cholecystectomy in 2020, 37.5% had no complications, 62.5% had accidental opening of the gallbladder, and none had bleeding. Among patients who underwent cholecystectomy in 2019, 81.8% had no complications, 9.09% had accidental opening of the gallbladder, and 9.09% presented bleeding. The mean stay in 2020 was 4.21±3.2 days, compared to 8.57±7.4 days in 2019 (p=0.005). Two patients of 19 diagnosed with acute cholecystitis in 2020 had COVID-19 disease.

Conclusion: The mean stay of the patients was shorter in 2020 period. These results can be explained by an early surgical management. So, early laparoscopic cholecystectomy should be considered as a treatment for acute cholecystitis in COVID-19 times if the clinical and hospital situation allows it. We found no differences in the number of patients diagnosed with acute cholecystitis between the two periods, nor in the mean number of days from the onset of symptoms.

Biography:

Belen Matias-Garcia works in Department of General and Digestive Surgery, Spain