ABSTRACT

INTRODUCTION: Choledocholithiasis complicates the working and management of cholelithiasis necessitating additional diagnostic procedures, increasing morbidity and mortality. CBD stone generally remain asymptomatic but when symptoms start appearing, cause a lot of suffering. There are various treatment modalities available presently. The objective of the dissertation is to study the incidence, various modes of clinical presentations and different modalities of treatment in common bile duct stones.

MATERIALS AND METHODS: 50 Patients were prospectively studied from march 2014 to September 2014 as in-patients in GOVERNMENT STANLEY MEDICAL COLLEGE AND HOSPITAL

DISCUSSION: CBD stones occurred predominantly in elderly females and presented from subclinal jaundice to complications in the form of biliary pancreatitis and cholangitis. USG abdomen with LFT was able to diagnose majority of the CBD stones preoperatively. Per operative cholangiogram was used selectively in case USG was inconclusive, ERCP was used in patients presenting with severe obstructive jaundice, pancreatitis, cholangitis, minimal CBD ductal dilation. Open exploration was the main focus with a wide variety of procedures performed according to specific indications.
CONCLUSION: CBD was more common in elderly female patients probably due to neglected gall bladder stones. CBD stones can occur from occult asymptomatic stones only with altered LFT to symptomatic presentation in the form of cholangitis, pancreatitis. USG abdomen was inexpensive and easily available imaging modality to diagnose CBD stones with per operative cholangiogram being needed in minority of the cases. While ERCP was good in treating complications of CBD stones and early stages of the disease; the more advanced stage of the disease with gross CBD ductal dilation and multiple stones open CBD exploration were more productive.

KEY WORDS: CBD; USG abdomen; LFT; Per op Cholangiogram; ERCP; Open CBD exploration.