

# Clinical effectiveness and cost-effectiveness of cholecystectomy compared with observation/conservative management for preventing recurrent symptoms and complications in adults presenting with uncomplicated symptomatic gallstones or cholecystitis: a systematic review and economic evaluation

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Declared competing interests of authors: none

Published August 2014

DOI: 10.3310/hta18550

## Plain English summary

### Cholecystectomy compared with observation/conservative management

Health Technology Assessment 2014; Vol. 18: No. 55

DOI: 10.3310/hta18550

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## Plain English summary

Gallstones are common, especially in women, but in many people they do not cause any symptoms.

About one in three people with gallstones develop symptoms. Symptoms usually include a severe pain in the upper right-hand side of the abdomen (known as 'biliary colic'), and sometimes nausea and vomiting. Sometimes the pain is accompanied by inflammation of the gallbladder (cholecystitis).

Once gallstones start giving symptoms, painkillers, anti-inflammatory medicines and antibiotics are usually prescribed.

Surgery to remove the gallbladder, known as cholecystectomy, is the most common way to treat biliary pain or cholecystitis due to gallstones. About 70,000 cholecystectomies are performed every year in the UK, with significant costs for the NHS.

In the UK, surgery is commonly offered to people who present at secondary care with pain or cholecystitis due to gallstones. However, it is known that some patients do not have any more symptoms after the initial episode of pain and that surgery may not be necessary. This assessment has shown that some people with mild symptoms do not experience a recurrence or suffer complications for many years. A policy of 'conservative treatment' (painkillers/antibiotics and lifestyle advice) could, therefore, be appropriate in this group of people. Our results indicate that, for the NHS, surgery is more expensive than 'conservative treatment' but is still the most clinically effective treatment for gallstones. There are, however, great uncertainties in the data. There is a need for new clinical studies to address these uncertainties.

ISSN 1366-5278 (Print)

ISSN 2046-4924 (Online)

Impact factor: 5.116

*Health Technology Assessment* is indexed in MEDLINE, CINAHL, EMBASE, The Cochrane Library and the ISI Science Citation Index and is assessed for inclusion in the Database of Abstracts of Reviews of Effects.

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## This report

The research reported in this issue of the journal was funded by the HTA programme as project number 12/16/01. The contractual start date was in August 2012. The draft report began editorial review in May 2013 and was accepted for publication in October 2013. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

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