Author's response to reviews

Title: Cholecystectomy in Sweden 2000 - 2003: a nationwide study on procedures, patient characteristics, and mortality

Authors:

Mats Rosenmuller (Mats.Rosenmuller@vll.se)
Markku Haapamaki (markku.haapamaki@surgery.umu.se)
Par Nordin (Par.Nordin@jill.se)
Hans Stenlund (hans.stenlund@epiph.umu.se)
Erik Nilsson (erik.nilsson@surgery.umu.se)

Version: 3 Date: 29 January 2007

Author's response to reviews: see over
Dear Editor,

Gallstone disease is a major cause of morbidity in the industrialised world today and its prevalence increases with age. Surgical removal of the gallbladder, cholecystectomy, is the preferred treatment, often supplemented by removal of gallstones in the bile ducts. Cost-effective treatment of gallstone disease is of interest to medicine and surgery alike.

Since more than a decade the majority of gallbladder operations are done with the laparoscopic technique. This preference is based upon randomised controlled trials demonstrating that the surgical trauma is less after laparoscopic cholecystectomy than after open cholecystectomy. However, it is also shown that the incidence of bile duct injuries has increased after the introduction of the laparoscopic cholecystectomy. Today, some 70 – 80 percent of all cholecystectomies for benign disease are done with the laparoscopic technique. Small-incision open cholecystectomy, which according to systematic reviews is equal to laparoscopic cholecystectomy with respect to postoperative recovery, is seldom used.

In the present study we have analysed selection of patients for conventional open cholecystectomy and laparoscopic cholecystectomy. This question is of importance to public health care and needs to be discussed openly among surgeons, doctors referring patients for gallbladder surgery, and laymen. We therefore consider this article of general medical interest.

Sincerely,

Erik Nilsson
Professor of surgery
Department of surgery
Umeå university hospital, SE 90185 Umeå, Sweden