Single umbilical incision laparoscopic cholecystectomy: Results of the prospective trial of the Coelio Club

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Summary

Aim: To assess the cosmetic outcome after single umbilical incision laparoscopic cholecystec-
tomies (SILC) performed by the surgeons of the Coelio Club.

Patients and Methods: Multicenter prospective study concerning 105 consecutive patients operated between December 2009 and February 2011 by SILC for non-complicated gallstones. Perioperative and postoperative parameters were analyzed with a systematic follow-up at 1 and 6 months postoperative.

Results: Conversion to conventional laparoscopic cholecystectomy (CLC) was required for six patients (5.7%). Conversion rate is higher in case of acute cholecystitis (25%, P < 0.001). Cosmetic outcome is found excellent by the patient (in 86% of the cases at 6 months) and by the surgeon (in 90% of the cases at 6 months) using an EVA scale. An incisional hernia was found in two cases (1.9%) and a superficial wound infection in four cases (3.8%).

Conclusions: The cosmetic outcome after SILC is found excellent. SILC has its place in the surgical management of the non-complicated gallstone. We did not notice higher level of peri-operative complications (biliary tract injury) during SILC than during CLC. Postoperative higher level of abdominal wall complications than after a CLC makes the surgeon caution to a careful abdominal wall closure.

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Introduction

Several studies have been published concerning the feasibility and the safety of laparoscopic cholecystectomy through one single umbilical incision (LCSUI) [1–5]. However, these