

The Chalkoo Technique In Minilap Cholecystectomy

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Abstract

As with any technology driven field, laparoscopic surgery has made tremendous progress in recent years. Since the performance of first laparoscopic cholecystectomy by Prof. Dr. Med. Erich Muhe of Boblingen, Germany, 1985, this procedure has overtaken open cholecystectomy as the treatment of choice in cholelithiasis. However, due to the cost incurred thereof and surgical training needed, open cholecystectomy is still performed on a very large scale in most parts of the third world countries. We tried to modify the conventional cholecystectomy to a minimal access approach (with minimal required infrastructure) to suite majority of patients with cholelithiasis in lieu of cost and morbidity.

Objective: To assess the outcome of modified minilap cholecystectomy and report our experience with our innovations and modifications in technique.

Patients and Methods: Between May 2006 and May 2008, two hundred patients with cholelithiasis aged between 15 and 56 years underwent minilap cholecystectomy in a prospective study in Govt. Medical College Srinagar. Our surgical approach was carried out using 3 to 5 cm oblique incision located two finger breadths below the costal margin, fashioned more laterally with a muscle cutting or splitting technique. The outcome was assessed in terms of intraoperative and postoperative parameters. The median range age was 38 (15-56) years and there were 143 females and 57 males in the study. All the procedures were completed successfully without any complications, although one patient needed the extension of incision as in conventional cholecystectomy.

Results: The mean operative time was 35 (20-110) minutes. Average blood loss was 30 ml. The mean hospital stay was 2 (1-5) days. The patients reported to normal work within 9 days of surgery. The mean follow up was 12 months.

Conclusions: Our results confirmed that minilap cholecystectomy by our modified approach is safe, feasible and has lesser morbidity and postoperative pain as compared to conventional open cholecystectomy. The technique is cost effective, easy to practice and can benefit majority of patients who otherwise cannot afford laparoscopic surgery. Hence, it can serve as an alternative to the gold standard laparoscopic cholecystectomy with almost comparable results.

Biography

Dr. Mushtaq Chalkoo's specialty is laparoscopy and minimal access surgery. He is currently employed for the Government Medical College Srinagar, Kashmir. He is also a Fellow of the Association of Minimal Access Surgeons of India and Fellow of the Indian Hernia Society, among other. He teaches MBBS (Bachelor of Medicine, Bachelor of Surgery) and postgraduates and is an active reviewer of many reputable international journals of medicine. He has won State Award for introducing Chalkoo technique to surgical world and is associated with more than 5 associations in India and has reviewed about 34 papers and published 50 scientific publications and attended about 35 conferences and had presented about 32 papers both at national and international level.