Self-Reported Outcomes Following Cholecystectomy for Pediatric Hyperkinetic Biliary Dyskinesia

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**Self-reported Outcomes following Cholecystectomy for Pediatric Hyperkinetic Biliary Dyskinesia**

Charlene Dekonenko, MD; Joseph A. Sujka, MD; Robert M. Dorman, MD; Tolulope A. Oyetunji, MD, MPH; Shawn St. Peter, MD

**Background**
- Biliary dyskinesia (BD) is a common indication for cholecystectomy in children.
- Symptom improvement in the majority of patients with an EF <35%
- The efficacy of cholecystectomy for hyperkinetic BD (EF >65%) is unknown

**Methods**
- Retrospective chart review & phone survey
- Children <18yr, laparoscopic cholecystectomy for hyperkinetic biliary dyskinesia
- September 2010 - July 2015
- Analysis in STATA; p-value < 0.05 significant

**Aim:** To determine if children with hyperkinetic BD have resolution of symptoms after laparoscopic cholecystectomy at our institution.

<table>
<thead>
<tr>
<th></th>
<th>Preop GI Meds</th>
<th>Preop Allergy Meds</th>
<th>Preop PPI</th>
<th>Pain with CCK</th>
<th>Chronic cholecystitis on pathology</th>
<th>No pain at follow-up</th>
<th>Satisfaction Score</th>
<th>Happy about Gallbladder Removal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asymptomatic (n=4)</td>
<td>50%</td>
<td>75%</td>
<td>0%</td>
<td>75%</td>
<td>100%</td>
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<td>100%</td>
</tr>
<tr>
<td>Symptomatic (n=4)</td>
<td>50%</td>
<td>0%</td>
<td>25%</td>
<td>50%</td>
<td>50%</td>
<td>25%</td>
<td>3</td>
<td>25%</td>
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<td>p-value</td>
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<td>0.14</td>
<td>1.0</td>
<td>1.0</td>
<td>0.43</td>
<td>0.49</td>
<td>0.37</td>
<td>0.14</td>
</tr>
</tbody>
</table>

**Conclusion**
- A high gallbladder EF does not correlate with symptom resolution in all children with HBD
- Cholecystectomy for hyperkinetic BD may or may not improve symptoms
- Further research should focus on pathophysiology of the disease in order to create an evidence-based definition of BD in children to determine who will benefit from cholecystectomy

**References**