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5-2019

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Recommended Citation

Dekonenko, Charlene; Sujka, Joseph A.; Dorman, Robert Michael; Oyetunji, Tolulope A.; and St Peter, Shawn D., "Self-Reported Outcomes Following Cholecystectomy for Pediatric Hyperkinetic Biliary Dyskinesia" (2019). *Posters*. 119.

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Self-reported Outcomes following Cholecystectomy for Pediatric Hyperkinetic Biliary Dyskinesia

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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

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

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

Results

	Preop GI Meds	Preop Allergy Meds	Preop PPI	Pain with CCK	Chronic cholecystitis on pathology	No pain at follow-up	Satisfaction Score	Happy about Gallbladder Removal
Asymptomatic (n=4)	50%	75%	0%	75%	100%	67%	10	100%
Symptomatic (n=4)	50%	0%	25%	50%	50%	25%	3	25%
<i>p</i> -value	1.0	0.14	1.0	1.0	0.43	0.49	0.37	0.14

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

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