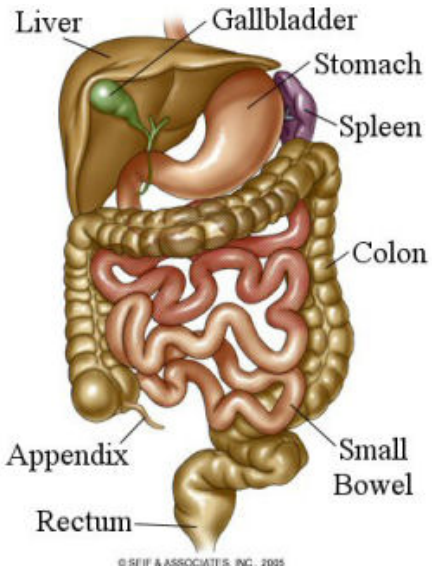
Biliary Colic

Biliary colic is a steady or irregular pain in the upper abdomen. It is usually under the right side of the rib cage. It happens when gallstones interfere with the normal flow of bile from the gallbladder. Bile is a liquid that helps to digest fats. Bile is made in the liver and stored in the gallbladder. When you eat a meal, bile passes from the gallbladder through the cystic duct and the common bile duct into the small intestine. There, it mixes with partially digested food. If a gallstone blocks either of these ducts, the normal flow of bile is blocked. The muscle cells in the bile duct contract forcefully to try to move the stone. This causes the pain of biliary colic.



SYMPTOMS

- A person with biliary colic usually complains of pain in the upper abdomen. This pain can be:
  - In the center of the upper abdomen just below the breastbone.
  - In the upper-right part of the abdomen, near the gallbladder and liver.
  - Spread back toward the right shoulder blade.
- Nausea and vomiting.
- The pain usually occurs after eating.
- Biliary colic is usually triggered by the digestive system's demand for bile. The demand for bile is high after fatty meals. Symptoms can also occur when a person who has been fasting suddenly eats a very large meal. Most episodes of biliary colic pass after one to five hours. After the most intense pain passes, your abdomen may continue to ache mildly for about 24 hours.

DIAGNOSIS

After you describe your symptoms, your caregiver will perform a physical exam. He or she will pay attention to the upper right portion of your belly (*abdomen*). This is the area of your liver and gall bladder. An ultrasound will help your caregiver look for gallstones. Specialized scans of the gallbladder may also be done. Blood tests may be done, especially if you have fever or if your pain persists.

PREVENTION

Biliary colic can be prevented by controlling the risk factors for gallstones. Some of these risk factors, such as heredity, increasing age and pregnancy are a normal part of life. Obesity and a high-fat diet are risk factors you can change through a healthy lifestyle. Women going through menopause who take hormone replacement therapy (*estrogen*) are also more likely to develop biliary colic.

TREATMENT

- Pain medication may be prescribed.
- You may be encouraged to eat a fat-free diet.
- If the first episode of biliary colic is severe, or episodes of colic keep retuning, surgery to remove the gallbladder (*cholecystectomy*) is usually recommended. This procedure can be done through small incisions using an instrument called a laparoscope. The procedure often requires a brief stay in the hospital. Some people can leave the hospital the same day. It is the most widely used treatment in people troubled by painful gallstones. It is effective and safe, with no complications in more than 90% of cases.
- If surgery cannot be done, medication that dissolves gallstones may be used. This medication is expensive and can take months or years to work. Only small stones will dissolve.
- Rarely, medication to dissolve gallstones is combined with a procedure called shock-wave lithotripsy. This procedure uses carefully aimed shock waves to break up gallstones. In many people treated with this procedure, gallstones form again within a few years.

PROGNOSIS

If gallstones block your cystic duct or common bile duct, you are at risk for repeated episodes of biliary colic. There is also a 25% chance that you will develop acute cholecystitis, or some other complication of gallstones within 10 to 20 years. If you have surgery, schedule it at a time that is convenient for you and at a time when you are not sick.

HOME CARE INSTRUCTIONS

- Drink plenty of clear fluids.
- Avoid fatty, greasy or fried foods, or any foods that make your pain worse.
- Take medications as directed.

SEEK MEDICAL CARE IF:

- You develop a fever over 100.5º F (38.1º C).
- Your pain gets worse over time.
- You develop nausea that prevents you from eating and drinking.
- You develop vomiting.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have continuous or severe belly (*abdominal*) pain which is not relieved with medications.
- You develop nausea and vomiting which is not relieved with medications.
- You have symptoms of biliary colic and you suddenly develop a fever and shaking chills. This may signal a gallbladder infection (*cholecystitis*). Call your caregiver immediately.
- You develop a yellow color to your skin or the white part of your eyes (*jaundice*).

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