Porcelain gallbladder

Diogo Albergaria, Nuno Carvalho, Filipe Borges, António Folgado and João Corte-Real

Department of Surgery. Hospital Garcia de Orta. Almada, Portugal

CASE REPORT

A 62-year-old female was referenced to our outpatient clinic for a single episode of right upper quadrant pain and weight loss of 3 kg in the last 6 months. No other complaints were reported. Her past medical history was unremarkable except for total hysterectomy.

The upper abdominal ultrasonography and abdominal plain X-ray revealed a porcelain gallbladder (Fig. 1).

DISCUSSION

The physiopathology of this rare entity is still controversial. It is thought to be related to chronic cholecystitis and is characterized by the presence of calcium deposits on the gallbladder wall. There are two types of calcifications reported: the diffuse type and the selective type (1).

A study from Argentina in 1967 raised concern. The incidence of gallbladder carcinoma associated with porcelain gallbladder was 62% (2); however, recent studies have showed that the incidence of gallbladder carcinoma is 7% in the selective type (3).

Our patient was submitted to laparoscopic cholecystectomy. The histology revealed a chronic cholecystitis with dystrophic calcifications of the gallbladder wall.

The treatment of porcelain gallbladder should be individualized and discussed with the patient. Cholecystectomy is still an option, alternative to close surveillance.

REFERENCES

