



## **Education**

### **Common Bile Duct Exploration**

#### **What is a common bile duct exploration?**

The common bile duct is a tube that connects the liver, gallbladder, and pancreas to the small intestine. It helps deliver fluids for digestion.

A common bile duct exploration is a procedure used to see if a stone is blocking the flow of bile from your liver and gallbladder to your intestine.

#### **When is it used?**

When a stone gets stuck in the common bile duct it may cause bile to back up into the liver. This causes jaundice. Jaundice is a condition in which the skin and the whites of the eyes become yellowish. If the stone is not removed, the common bile duct may become infected and need emergency surgery. It can also cause pancreatitis, a reaction in the pancreas that can be life threatening. Common bile duct exploration is often done during surgery to remove the gallbladder.

An alternative procedure is an endoscopic retrograde cholangiopancreatography (ERCP). When an ERCP is done, a tube is inserted through your mouth and stomach into the small intestine. The tube can be used to put contrast dye into the duct to look for stones with x-rays. If there are stones, a small opening is made in the common duct to allow the stone or stones to pass into the intestine. You should ask your health care provider about these choices.

#### **How do I prepare for a common bile duct exploration?**

Plan for your care and recovery after the operation. Allow for time to rest and try to find people to help you with your day-to-day duties.

Follow your health care provider's instructions about not smoking before and after the procedure. Smokers heal more slowly after surgery. They are also more likely to have breathing problems during surgery. For this reason, if you are a smoker, you should quit at least 2 weeks before the procedure. It is best to quit 6 to 8 weeks before surgery. Also, your wounds will heal much better if you do not smoke after the surgery.

Follow any other instructions your provider gives you. Eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure. In some cases your health care provider says it is OK to have clear liquids up to 4 hours before the procedure.

#### **What happens during the procedure?**

You will be given general anesthesia. It will relax your muscles, put you to sleep, and prevent you from feeling pain during the operation.

The surgeon makes a cut in your abdomen and finds the common bile duct. Then he or she injects contrast dye into the duct to take an x-ray. This may show if and where there are stones.

If stones are found, the surgeon will make a cut in the duct, remove them, and check for other stones. The surgeon will then insert a tube into the duct and connect the tube to a drainage bag so the bile can drain into the bag. Several days later you will have another x-ray to see if the duct is clear. If it is, the tube can be removed about 2 to 3 weeks later. If stones remain, a radiologist can use the tube site to try to remove the stones about 6 weeks after surgery.

#### **What happens after the procedure?**

You will be sore for a couple of weeks. You will have intravenous fluids during the first day or two because your

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intestines will be slow to start working again. If you have a tube draining your common bile duct, you may stay in the hospital for 4 days or more. The tube may stay in place after you leave the hospital for 2 weeks or as long as several weeks. Follow your health care provider's instructions for gradually going back to your normal diet.

Avoid strenuous activity, such as lifting, for 4 to 6 weeks.

Ask your health care provider when you should come back for a checkup.

### **What are the benefits of this procedure?**

If stones were removed, you will no longer have the discomfort of a blocked duct. You will have less chance of getting jaundice and infection.

### **What are the risks associated with this procedure?**

- There are some risks when you have general anesthesia. Discuss these risks with your health care provider.
- Swelling or scarring may damage the duct.
- Bile may leak from the duct.
- The surgeon may have to open your small intestine.
- You may develop an infection, and if the surgeon has to reopen the cut and insert a tube to allow the infection to drain, it may take longer to heal.
- You may have bleeding.

You should ask your health care provider how these risks apply to you.

### **When should I call my health care provider?**

After you have gone home from the hospital, call your provider right away if:

- You have abdominal pain.
- Your wound becomes red, warm, or very sore or starts to drain fluid.
- You develop nausea and vomiting.
- You develop a fever.

Call during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.

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## Liver, Gallbladder, and Pancreas

