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Biliary microflora in patients undergoing cholecystectomy

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Management of acute cholecystitis requires an updated knowledge of the biliary micro flora in the community at large. MAt Enkoping Hospital, Sweden, bile samples have been taken for culture according to a standard routine during all cholecystectomies since April 2007. Use of antibiotics within 3 months prior to surgery, indication for surgery, prophy-lactic antibiotics and postoperative complications have also been registered prospectively. Until February 2009, 246 procedures have been registered, including 149 (62%) on women. Mean age was 49 years (SD±16 years)). Bacterial growth was seen in 34 (14%) of the cultures. Mean age for patients with positive cultures was 64 years, and 47 years for those with negative cultures (p<0.001). Positive culture was seen in 16 (31%) of the 51 cases operated for acute cholecystitis whereas in 195 patients without acute cholecystitis positive culture was obtained in 18 cases (9%, p<0.001). Resistance to ampicillin was recorded in 3/34 (9%), to co-trimoxazole in 1/34 (3%), to quinolones in 1/34 (3%) and to cephalosporin's in 1/34 (3%) of the cultures. Resistance to piperacillin-tazobactam was not observed in any of the cultures. In multivariate logistic analysis, positive culture was the only factor significantly associated with risk for postoperative infectious complications (p<0.05). The microflora of the bile seems to be crucial for the outcome of sur-gery, but further studies are required for assessing the effectiveness of measures of pre-venting infectious postoperative complications.

Biography

Bahman Darkahi completed his medical studies at the age of 29 years at the Capital Uni-versity of Istanbul, and postdoctoral studies at Uppsala University hospital, Sweden. He is consultant surgeon at the department of surgery Enkoping, Sweden. He has published papers in reputed journals. He is responsible for gallstone surgery at Enkoping hospital. In his research, he is primarily interested in the role of the microflora in the pathogenesis of cholecystitis infection and the effectiveness of antibiotics as prophylaxiss in gallstone surgery.

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