**Acute cholecystitis**

Acute cholecystitis is sudden swelling and irritation of the gallbladder.

**Causes**

* [gallstone](https://www.nlm.nih.gov/medlineplus/ency/article/000273.htm) blocks the cystic duct, the tube through which bile travels into and out of the gallbladder. When a stone blocks this duct, bile causing irritation and pressure in the gallbladder. This can lead to swelling and infection.
* Other causes include:
* Serious illnesses, such as HIV or diabetes
* Tumors of the gallbladder (rare)
* Some people are more at risk for gallstones. Risk factors include:
* Being female
* Pregnancy
* Hormone therapy
* Older age
* Obesity
* Losing or gaining weight rapidly
* Diabetes

Sometimes the bile duct becomes blocked temporarily. When this occurs repeatedly, it can lead to [chronic cholecystitis](https://www.nlm.nih.gov/medlineplus/ency/article/000217.htm). This is swelling and irritation that continues over time. Eventually, the gallbladder becomes thick and hard. It does not store and release bile as well as it did.

**What are the symptoms?**

The most common symptom of cholecystitis is pain in [upper right abdomen](http://www.webmd.com/pain-management/abdominal-pain)  that can sometimes move around to back or right[shoulder](http://www.webmd.com/pain-management/picture-of-the-shoulder) blade. Other symptoms include:

1. [Nausea](http://www.webmd.com/children/ss/nausea-vomiting-remedies-treatment) or [vomiting](http://www.webmd.com/digestive-disorders/digestive-diseases-nausea-vomiting).
2. Tenderness in the right [abdomen](http://www.webmd.com/digestive-disorders/picture-of-the-abdomen).
3. Fever.
4. Pain that gets worse during a deep breath.
5. Pain for more than 6 hours, particularly after meals.
6. Yellowing of skin and whites of the eyes (jaundice)
7. Clay-colored stools

How is cholecystitis diagnosed?

1. History and clinical examination
2. [Amylase](https://www.nlm.nih.gov/medlineplus/ency/article/003464.htm) and lipase level
3. [Bilirubin](https://www.nlm.nih.gov/medlineplus/ency/article/003479.htm) level
4. Complete blood count ([CBC](https://www.nlm.nih.gov/medlineplus/ency/article/003642.htm))
5. [Liver function tests](https://www.nlm.nih.gov/medlineplus/ency/article/003436.htm)
6. Imaging tests can show gallstones or inflammation. as may have one of these tests:
7. [Abdominal ultrasound](https://www.nlm.nih.gov/medlineplus/ency/article/003777.htm)
8. [Abdominal CT scan](https://www.nlm.nih.gov/medlineplus/ency/article/003789.htm)
9. [Abdominal x-ray](https://www.nlm.nih.gov/medlineplus/ency/article/003815.htm)
10. Oral cholecystogram
11. [Gallbladder scan](https://www.nlm.nih.gov/medlineplus/ency/article/003826.htm)

**Treatment**

If have severe pain,to seek medical attention right away.

In the emergency room, to give fluids through a vein. also may be given antibiotics to fight infection.

Cholecystitis may clear up on its own. However, if have gallstones, will probably need [surgery to remove gallbladder](https://www.nlm.nih.gov/medlineplus/ency/article/002930.htm).

Nonsurgical treatment includes:

* Antibiotics to fight infection
* Low-fat diet
* Pain medicines

emergency surgery if have complications such as:

* [Gangrene](https://www.nlm.nih.gov/medlineplus/ency/article/007218.htm) (tissue death)
* Perforation of the gallbladder
* [Pancreatitis](https://www.nlm.nih.gov/medlineplus/ency/article/000122.htm) (inflamed pancreas)
* Persistent bile duct blockage
* Inflammation of the common bile duct

**Possible Complications**

Untreated, cholecystitis may lead to any of the following health problems:

* [Empyema](https://www.nlm.nih.gov/medlineplus/ency/article/000123.htm) (pus in the gallbladder)
* Gangrene
* Injury to the bile ducts draining the liver (may occur after gallbladder surgery)
* Pancreatitis
* Perforation
* [Peritonitis](https://www.nlm.nih.gov/medlineplus/ency/article/001335.htm) (inflammation of the lining of the abdomen)