STRUCTURE IN THE INSTITUTIONAL REPOSITORY

- **Title:** Clinical Practice guideline for diagnosis and management of cholelithiasis, acute cholecystitis and choledocholithiasis.
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Abstract:

Background: This paper abstracts the Clinical Practice guideline (CPG) for diagnosis and management of cholelithiasis, acute cholecystitis and choledocholithiasis in the Peruvian Social Security (EsSalud).

Objective: to provide evidence-based clinical recommendations for diagnosis and management of cholelithiasis, acute cholecystitis and choledocholithiasis in EsSalud.

Methods: a guideline task force (GTF) was formed with internists, general surgeons, gastroenterologists, and methodologists. The group proposed 10 clinical questions to be answered in this Clinical practice guideline (CPG). Systematic searches of preview reviews were performed and when it was necessary, primary studies from PubMed and CENTRAL during 2017 were reviewed. The evidence was selected aiming to answer each proposed question. Certainty of evidence was evaluated using Grading of Recommendations Assessment, Development, and Evaluation (GRADE) methodology. In periodical work sessions, the group used GRADE methodology for reviewing the evidence and formulating recommendations, good clinical practice items and three flowcharts for diagnosis and treatment. Finally, the CPG was approved by Resolution Nº 046-IETSI-ESSALUD-2017.

Results: This CPG approached 10 clinical questions divided into two topics: diagnosis and management. Based on these questions; one strong recommendation, five weak recommendations, and 17 good clinical practice items and three flowcharts were formulated.

Conclusion: This paper abstracts the methodology and evidence-based conclusions of the CPG for diagnosis and management of cholelithiasis, acute cholecystitis and choledocholithiasis in EsSalud.

Key words: Practice Guideline, GRADE Approach, cholelithiasis, acute cholecystitis, choledocholithiasis.

• PICO questions for CPG:

CHOLELITHIASIS

PREVENTION							
Question 1: What signs, symptoms, and risk factors should alert the physicians to							
suspect symptomati	suspect symptomatic cholelithiasis?						
POPULATION	EXPOSURE COMPARATOR OUTCOME(S)						
- Population with	- Abdominal pain		- Prognosys of				
symptomatic	symptomatic						
cholelithiasis	· · ·						

DIAGNOSIS							
Question 2: What is the most accurate strategy to diagnose cholelithiasis in adults							
suspected of this co	suspected of this condition?						
POPULATION	POPULATION INTERVENTION COMPARATOR OUTCOME(S)						
- Patients	- Ultrasound	- No ultrasound	- Sensibility				
suspected of	- Specificity						
cholelithiasis							

MANAGEMENT					
Question 3: Which strategies should be used to manage the asymptomatic					
cholelithiasis?					
POPULATION	INTERVENTION	COMPARATOR	OUTCOME(S)		
- Patients with	- Surgery	- No surgery	- Mortality		
cholelithiasis			- Complications		
			related to		
			cholelithiasis		
Question 4: What is	the treatment of the	acute phase of biliary	colic?		
POPULATION	INTERVENTION	COMPARATOR	OUTCOME(S)		
Patients with	- Opiates,	- NSAIDs	- Decrease in pain		
symptomatic	antispasmodics		- Complications		
cholelithiasis					

ACUTE CHOLECYSTITIS

DIAGNOSIS						
Question 5: What signs, symptoms and risk factors should alert to suspect acute						
cholecystitis?						
POPULATION	EXPOSURE COMPARATOR OUTCOME(S)					
- Patients with	- Right quadrant		- Prognosis of			
cholelithiasis	pain		cholelithiasis			
	- Age					
	- Female					
Question 6: What is the most accurate strategy to diagnose acute cholecystitis in						

Question 6: What is the most accurate strategy to diagnose acute cholecystitis in adults suspected of this condition?

INTERVENTION	COMPARATOR	OUTCOME(S)
- Ultrasound	- No ultrasound	- Sensibility - Specificity

MANAGEMENT						
Question 7: Does early cholecystectomy have better results compared to late						
cholecystectomy for	the treatment of acu	te cholecystitis?				
POPULATION	POPULATION INTERVENTION COMPARATOR OUTCOME(S)					
- Patients with acute cholecystitis	- Early surgery	- Late surgery	- General complications - Postoperative wound infections - Damage of the bile ducts during the surgery - Bile leak - Hospital stay			

CHOLEDOCHOLITHIASIS

DIAGNOSIS							
Question 8: Is the ASGE scale useful to assess the risk of choledocholithiasis?							
POPULATION	ON EXPOSURE COMPARATOR OUTCOME(S)						
- Patients suspected	- ASGE criteria		- Sensibility				
of			- Specificity				
choledocholithiasis							
Question 9: What is the most accurate strategy to diagnose choledocholithiasis in							
adults suspected of th	adults suspected of this condition?						
POPULATION	INTERVENTION	COMPARATOR	OUTCOME(S)				
- Patients suspected	- Magnetic Resonance	- Endoscopic	- Sensibility				
of	Cholangiopancreaticography	ultrasound	- Specificity				
choledocholithiasis	(MRCP)						

MANAGEMENT						
Question 10: What is the best strategy to manage the choledocholithiasis?						
POPULATION	POPULATION INTERVENTION COMPARATOR OUTCOME(S)					
- Patients with	- ERCP and surgery	- BDE (bile duct	- Mortality			
choledocholithiasis		exploration) and	- Progression of			
surgery disease						