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Clinical Impacts Of Postoperative Delirium After Cholecystectomy In Elderly Patients

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Background: Post-operative delirium (POD) is an unfortunately common complication of surgery for elderly patients. When POD occurs, it causes an increase in physical injury and hospitalization, leading to undesirable results of postoperative coarseness. Although cholecystectomy is the most commonly performed surgery, there is insufficient interest in POD. We aimed evaluate clinical significance of POD after cholecystectomy in patients over 75 years of age.

Methods: From January 2016 to December 2019, 201 elderly patients (>75 years) underwent a laparoscopic or open cholecystectomy at Pusan National University Hospital, Busan, South Korea. A retrospective review was performed based on the medical records. This study was a comparison of demographic feature and clinical results between POD (n=21) and Non-POD (n=180) group.

Results: The average age of patients was 79 years old and the male to female was 111:90. The average length hospital stay after cholecystectomy was 3 days. By August 2021, 16 patients (13.1%) had died. In the POD group, incidence of impairment of activity, PTGBD and blood culture positive were higher than non-POD group. In Non-POD group, BMI, albumin and sodium titer were higher than POD group. Also, In POD group, CRP, fraction of neutrophil count, NLR and operation time were significant higher. The frequency of POD increased when above 72% of neutrophil fraction, above 3.5 of NLR, above 103 minutes of operation time.

Conclusions: The incidence of POD after Cholecystectomy was associated with degree of inflammation (neutrophil fraction, NLR ratio, CRP, sepsis) and treatment stress (PTGBD, longer operation time). Although cholecystectomy is relatively safe operation even in the elderly, it will be necessary to actively recognize and prevent patients with various risk factors.

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