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Impact Of Patient Body Mass Index On Surgical Outcome After Single Port Laparoscopic Cholecystectomy

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Background : Single-port laparoscopic cholecystectomy(SPLC) is widely used as a treatment option for gallbladder disease to improve cosmesis. However, obesity has been considered a relative contraindication to this approach due to more advanced technical difficulties. The aim of this study is to review our experience with SPLC to evaluate the impact of body mass index(BMI) on the surgical outcome.

Methods : Between 2020 and 2022, 1940 patients underwent laparoscopic cholecystectomy, mostly SPLC, at our clinic. Pre- and post-operative data of the obese patients(group A)(BMI \geq 30kg/m²) and non-obese patients(group B)(BMI<30kg/m²) were compared retrospectively. Indications for SPLC included benign gallbladder disease, without any exceptional criteria.

Results : Mean age of patients was significantly higher in the group B than group A(46.63 \pm 13.564years vs 41.24 \pm 12.442years, p<0.001). Statistically significant differences pertaining to most measured surgical outcomes including postoperative hospital stay, multiport rate, additional port use, and postoperative complication rate were not detected between the groups. However, the two groups differed significantly regarding operative time such that group A had longer operative times than group B(49.50 \pm 20.97min vs 43.41 \pm 22.47min, p<0.001).

Conclusions : Our findings show that obesity, intended as a BMI \geq 30kg/m², does not have an adverse impact on the technical difficulty and post-operative outcomes of SPLC in any benign gallbladder disease.

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