

A Rare Case Report of Incidental Early Gallbladder Carcinoma in a Young Male with Hepaticolithiasis and Choledocholithiasis Presenting as Obstructive Jaundice

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Abstract:

Hepaticolithiasis and choledocholithiasis are important causes of obstructive jaundice and recurrent cholangitis. While extra hepatic bile duct stones are common, primary intrahepatic stones are relatively uncommon and are associated with chronic biliary stasis, recurrent infection, strictures, and cholangitic abscess formation. Long-standing biliary inflammation is a well-recognised risk factor for epithelial dysplasia and malignant transformation within the biliary tract.

Gallbladder carcinoma is the most common malignancy of the biliary system and is frequently associated with chronic cholelithiasis. However, early-stage disease is rarely diagnosed preoperatively due to nonspecific clinical and radiological findings. Intracholecystic papillary neoplasm (ICPN) is a recognised precursor lesion that may harbour high-grade dysplasia or invasive carcinoma.

The coexistence of complex hepaticolithiasis, impacted choledocholithiasis, and incidental early gallbladder carcinoma in a young patient is uncommon. This case highlights the diagnostic challenges, limitations of endoscopic management in impacted biliary stones, the role of definitive surgical intervention, and the importance of meticulous histopathological evaluation in detecting early malignancy with excellent prognosis.