Summary

28 of 30 laparoscopic cholecystectomies were successfully completed for acute gallbladder disease beyond the conventional coded time of 72 hours from onset of the symptoms up to 5 weeks later. Ultra-sonic devices (Harmonic Scalpel) were the energizer tools for surgical dissection. Intra-operative difficulties in some cases were encountered in the form of variable density of omental and other structures adhesions with difficult separation, difficulty in grasping gallbladder fundus, difficult dissection at Calot triangle, cystic duct & artery identification-isolation-clipping, difficult dissection of gallbladder off its liver bed and difficult extraction of the gallbladder. These difficulties do not influence the safe and the effective progress of surgery. No intra-operative complications were met. 2 cases were not completed, needed shift to another procedure. One of them, subjected to cholecystostomy and the other was converted to laparotomy where sub-total cholecystectomy was performed. 2 cases had post-operative complications graded according to *Clavien-Deino* Grading System as 1 and 2.

In summary, laparoscopic cholecystectomy for acute gallbladder disease, beyond the conventional coded time of 72 hours from the onset of symptoms, using ultra-sonic energy devices for surgical dissection; bears a high threshold of safety & feasibility with an excellent overall outcome in certain patients. This is mainly evident provided that the operator is an experienced laparoscopic surgeon adopted to complicated techniques; in a highly equipped laparoscopic center owing the finest technology sets.