LETTER TO EDITOR





Letter to the Editor: Cholecystectomies in the COVID-19 Pandemic During and After the First Lockdown in Germany: an Analysis of 8561 Patients

Tiantian Lei¹ · Hongsheng Ma¹

Received: 5 November 2021 / Accepted: 13 November 2021 / Published online: 8 January 2022 © The Society for Surgery of the Alimentary Tract 2021

To the Editor:

We enjoyed reading the article by Franziska et al. in the recent issue of *Journal of Gastrointestinal Surgery*. The authors have described the significant impact on the cholecystectomies performed in Germany during the coronavirus disease-19 (COVID-19) pandemic, which led to a major reduction in the number of cholecystectomies in the lockdown periods.

We thank the authors for conducting the comparison between the deficit phase and resumption phase in 2020 and 2019, separately. Further, we completely agree with the fact that those significant changes are resulted from the so-called diluent cases, which including a large number of elective cholecystectomies postponed or canceled in the early stage of COVID-19 outbreak.

From this perspective, we would like to report the elective laparoscopic cholecystectomies as day surgery cases in the pre-pandemic, during the pandemic, and post-pandemic based on the practice and experience from China. The records of 2707 elective laparoscopic cholecystectomies were reviewed in a tertiary medical center of western China from January 2019 to October 2021. The number of operations was compared on a monthly basis in Fig. 1. The impact of the COVID-19 resulted in a significant reduction of cases from February to April 2020. Particularly, it dropped to zero as a result of the completely lockdown in February 2020. In February to April 2020, the monthly average dropped to 35 cases, compared with a 53.1% decrease in the corresponding

period in 2019 and a 59.2% decrease in 2021. In the following months, the number of cases showed a rapid and continuous growth to the normalization level. All patients were discharged within 24 h, and no in-hospital mortality or any life-threatening postoperative complications were observed. The conversion from laparoscopic to open cholecystectomy was absent in 2020 (compared with 3 patients in 2019, 2 patients in 2021).

Above all, we considered that the analysis of elective laparoscopic cholecystectomy might be more crucial for evaluating the resumption when responding to the COVID-19 outbreak. In contrast to Germany, the elective laparoscopic cholecystectomy in our study center quickly resumed after a brief 2-month lockdown, and the total number of cholecystectomies per year in Day Surgery Center increased steadily. The average waiting period for elective laparoscopic cholecystectomy before admission was shown within 2 weeks. Particularly, none of these patients were found to be positive for the COVID-19 test on the basis of the strict precautions.

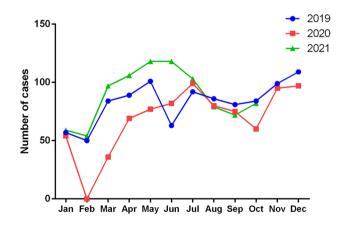


Fig. 1 The number of elective laparoscopic cholecystectomy were compared before, during, and after the COVID-19 pandemic based on monthly data

Department of Day Surgery, West China Hospital of Sichuan University, 37 Guoxue Alley, Chengdu 610041, Sichuan, China



Hongsheng Ma mahongsheng@wchscu.cn
Tiantian Lei

leitiantian@wchscu.cn

Author Contribution TT Lei: project development, data analysis, and manuscript writing and editing.

HS Ma: project development and manuscript revision.

Funding This work was supported by the National Natural Science Foundation of China (Grant No. 72104161), Sichuan Science and Technology Program (Grant No. 2021YFH0005), and the 1·3·5 Project for Disciplines of Excellence-Clinical Research Incubation Project (Grant No. 2020HXFH054).

Declarations

Conflict of Interest The authors declare no competing interests.

Reference

 Koch F, Hohenstein S, Bollmann A, et al. Cholecystectomies in the COVID-19 Pandemic During and After the First Lockdown in Germany: an Analysis of 8561 Patients [published online ahead of print, 2021 Oct 20]. J Gastrointest Surg. 2021;1–6. doi:https:// doi.org/10.1007/s11605-021-05157-0.

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