Aim. Cholelithiasis is the one of the worldwide disease, which occurs in 10% of the population in the world. 96-98% of cholecystectomies perfume by laparoscopic method. According many reports after laparoscopic cholecystectomy (LCE) complications observed at 1% to 8.5%. The aim is to evaluate the complications of laparoscopic cholecystectomy.

Materials and methods. 1484 LCE operations were analyzed, which performed in period 2009-2017. Among them 914 patients (61,6%) had GS with acute cholecystitis, 570 (38.4%) – chronic cholecystitis. Woman – 79,6% (n=1181), man – 20,4% (n=303), average age was 49,5±5,3 year.

Results. Intraoperative and early postoperative complications (with conversion) was in 61 (4,1%) patients. The conversion to laparotomy was in 46 (3,16%) cases. Cause of conversions was: adhesive infiltrative process of hepatoduodenal ligament – 34 cases (73,9%), common bile duct injure – 5 (10,8%), liver abscess detection – 1 (2,1%), atypical cystic artery – 1 (2,1%), massive bleeding from cystic artery – 2 (4,3%), bleeding from gallbladder bed – 2 (4,3%), duodenum wall injure – 1 (2,1%). In early postoperative period observed following 15 (1,0%) complications: bile leakage – in 9 patients (in 5 patients it stopped on their own), bleeding – 2, sub-hepatic infiltrate – 4, choleperitonitis after injure of extrahepatic bile duct – 3. Three patients had relaparoscopy due to bile leakage from cystic duct stump (1 case) and bleeding from cystic artery (2 cases). Reasons of early 4 laparotomy were postoperative bleeding – 1 patient, bile leakage – 3 cases. In three cases with bile leakage we held suturing the bile duct wall. Abdominal wall wound inflammatory complications were 5%. One patient after LCE had pulmonary artery thromboembolism and died.

Conclusions. Our study of intraoperative and early postoperative complications of LCE can eliminate risk factors that contribute to development. Careful comprehensive preoperative examination to the prediction of the complexity of surgical intervention will improve results of LCE.