



FIGURE 95-3 Diverticulosis. (From the Netter Collection of Medical Illustrations. Available at www.netterimages.com. Accessed October 31, 2014.)

identified. Bacterial contamination of the gallbladder occurs in 15% to 30%. If obstruction continues, gangrenous cholecystitis, necrosis of the gallbladder wall and abscess or empyema may occur. Perforation, which rarely occurs, is usually limited to the subhepatic space. Infection by gas-forming organisms may result in emphysematous cholecystitis.

Acute cholangitis with common duct obstruction can cause mild and self-limited disease to fulminant, life threatening

infection. Two thirds of patients have Charcot's triad (i.e., right upper quadrant pain, fever, and jaundice). Fever is often accompanied by rigors. The addition of hypotension and mental status changes results in Reynolds pentad (i.e., jaundice, fever, abdominal pain, shock, and altered mental status), a sign of severe disease. Leukocytosis and elevated alkaline phosphatase and bilirubin levels are typical. Bile cultures usually show bowel organisms, and blood cultures are positive in 30% to 40% of cases.