This information should not be used to diagnose yourself or in place of a doctor’s care.

The gallbladder is a small, pear-shaped pouch underneath the liver. It is usually about 7-10 cm (3-4 inches) long and about 2.5 cm (1 inch) wide.

The gallbladder stores bile and releases it into the small intestine through a tube called the bile duct. Bile is a fluid made in the liver to help digest fats in the small intestine.


**Diagnosis and Staging**

What are the signs and symptoms of gallbladder cancer?

Gallbladder cancer is rare.

There are usually no symptoms in the early stages of gallbladder cancer.

Common symptoms in people with later stage gallbladder cancer include:

- Pain in the upper right abdomen
- Nausea (feeling queasy) or vomiting
- Jaundice (when your skin and whites of your eyes turn yellow)
- Gallbladder enlargement (when your gallbladder is larger than it should be). This would only be found if you had an imaging test done, such as an abdominal ultrasound.

Less common symptoms include:

- Loss of appetite
- Unexplained weight loss
- Swelling of your abdomen
- Fever
Itchy skin
Black tarry stools (poop)

If you have any signs or symptoms that you are worried about, please talk to your family doctor or nurse practitioner.

How is gallbladder cancer diagnosed?

Most gallbladder cancers are found during surgery to remove the gallbladder (cholecystectomy).

Tests that may help diagnose gallbladder cancer include:

- **Ultrasound**: to see the tumor.
- **Endoscopic ultrasound**: a doctor puts an endoscope with a small ultrasound device through your mouth and into your esophagus.
- **CT (computed tomography) scan**: to see the tumor and if the cancer has spread.
- **MRI (magnetic resonance imaging)**: to see the tumor and if the cancer has spread.
- **Biopsy**: surgery to take a sample of the growth or area. The sample is examined by a specialist (pathologist) to see if it is cancer.
- **A laparoscopy** may be done for staging (see below). A laparoscope is thin tube with a light and camera on it. It is put through a cut made in your abdomen. This procedure is done under general anesthetic.
- **A biopsy** is usually only done for gallbladder cancers that cannot be removed by surgery.

What are the types of gallbladder cancer?

**Adenocarcinomas**

- About 95% (95 out of 100) of gallbladder cancers.
• Begin in the cells that line the gallbladder and then grow into the wall of the gallbladder.

• Three types of adenocarcinomas:
  o **Non-papillary:** more than 75% (75 out of 100) of gallbladder adenocarcinomas.
  o **Papillary:** about 6% (6 out of 100) of gallbladder adenocarcinomas.
  o **Mucinous:** least common gallbladder adenocarcinoma

**Rare types of gallbladder cancer include:**

• Sarcoma
• Squamous cell carcinoma
• Adenosquamous carcinoma
• Carcinosarcoma
• Signet ring carcinoma
• Small cell carcinoma
• Carcinoid

**What are the stages of gallbladder cancer?**

Staging describes the cancer. Staging is based on how much cancer is in the body, where it was first diagnosed, if the cancer has spread and where it has spread to.

The stage of the cancer can help your health care team plan your treatment. It can also tell them how your cancer might respond to treatment and the chance that your cancer may come back (recur).

**Gallbladder cancer staging:**

• **Stage 0:** Tumour (cancer growth) is only in the inner lining of the gallbladder. It has not grown into the gallbladder wall.
• **Stage 1A:** Tumour has grown into the connective tissue layer (lamina propria) of the gallbladder.

• **Stage 1B:** Tumour has grown into the muscle layer around the lamina propria.

• **Stage 2A:** Tumour has grown into the connective tissue on top of the muscle layer on the side of the gallbladder that is next to the liver.

• **Stage 2B:** Tumour has grown into the perimuscular connective tissue on the side of the gallbladder next to the peritoneum (a layer of tissue that lines your abdominal cavity).

• **Stage 3A:** One of the following
  - Tumour has grown through the outer layer of the gallbladder (serosa)
  - Tumour has grown into the liver.
  - Tumour has grown into 1 nearby organ.

• **Stage 3B:** Tumour has grown through the outer layer of the gallbladder or into the gallbladder wall AND has spread to 1-3 nearby lymph nodes.

• **Stage 4:** Cancer has spread to any of the following areas:
  - Main blood vessels leading into the liver (portal vein or hepatic artery), with or without spreading to 1-3 lymph nodes.
  - Two or more organs outside the gallbladder, with or without spreading to 1-3 lymph nodes.
  - 4 or more nearby lymph nodes.
  - Parts of the body farther away from the gallbladder, such as the lungs. This is called distant metastasis.

For more information on staging, see our About Cancer page:

[bcancer.bc.ca/health-info/types-of-cancer/about-cancer](bcancer.bc.ca/health-info/types-of-cancer/about-cancer)
What are the grades of gallbladder cancer?

The grade of the cancer describes how different the cancer cells look from normal cells and how fast the cancer cells are growing. A pathologist will give the cancer a grade after looking at the cells under a microscope.

Gallbladder cancer can be grade 1, 2, or 3. The lower the number, the lower the grade.

- **Low grade:** cells are abnormal but look a lot like normal cells. Low grade cancers usually grow slowly and are less likely to spread.
- **High grade:** cells are abnormal and do not look like normal cells. High grade cancers usually grow more quickly and are more likely to spread.

**Treatment**

What is the treatment for gallbladder cancer?

Cancer treatment may be different for each person. It depends on your particular cancer. Your treatment may be different from what is listed here.

**Surgery**

- Removing the cancer and your gallbladder is the only cure for gallbladder cancer.
- Only possible in 10-30% (10-30 out of 100) of people with gallbladder cancer.
- If the cancer is found during surgery for gallstones and it has not grown into the gallbladder wall, over 60% (60 out of 100) of people can be successfully treated and have a normal life expectancy.
- Only 5% (5 out of 100) of people with symptoms from gallbladder cancer will have a normal life expectancy.
- You can have your gallbladder removed without any long-term effects.
• **Types of surgery**
  
  o **Cholecystectomy**: gallbladder is removed.
  
  o **Extended cholecystectomy**: gallbladder, part of the liver, the common bile duct and nearby lymph nodes are removed.
  
  o **Radical cholecystectomy**: gallbladder, part of the liver, the common bile duct, nearby lymph nodes, and other organs such as the pancreas, small intestine or the colon are removed.
  
  • If the cancer cannot be removed, surgery may be done to help with a blockage or to put in a stent (metal or plastic tube) into the bile duct to keep it open.

**Radiation therapy** (high energy x-rays that kill or shrink cancer cells)

• May be used to slow the growth of the cancer or to help with pain.

• For more information about radiation therapy go to:
  
  [bccancer.bc.ca/our-services/treatments/radiation-therapy](bccancer.bc.ca/our-services/treatments/radiation-therapy)

**Systemic therapy (chemotherapy)**

• Can be useful for incurable gallbladder cancers. It may lead to a partial remission or help some people live longer.

• Can also relieve symptoms.

• For more information about systemic therapy go to:
  
  [bccancer.bc.ca/our-services/treatments/systemic-therapy-(chemotherapy)](bccancer.bc.ca/our-services/treatments/systemic-therapy-(chemotherapy))

**What is the follow-up after treatment?**

• Follow-up testing and appointments are based on your type of cancer.
• After treatment, you may return to the care of your family doctor or specialist for regular follow-up. If you do not have a family doctor, please talk to your BC Cancer health care team.

• The BC Cancer Life after Cancer page has information on issues that cancer survivors may face: bccancer.bc.ca/lifeaftercancer

More Information

What causes gallbladder cancer and who gets it?

These are some of the risk factors for this cancer. Not all of these risk factors may cause this cancer, but they may help the cancer start growing.

• Gallbladder cancer is rare.

• More women than men get gallbladder cancer [see note below, Statistics].

• Being over the age of 65.

• More common among Mexican Americans and Native Americans.

• Having gallstones (hard deposits of cholesterol and bile salts in the gallbladder). 75-90% (75-90 out of 100) of people with gallbladder cancer has gallstones. However, most people with gallstones never develop gallbladder cancer.

• Having gallbladder polyps (growths that grow out from the lining of the inside of the gallbladder).

• Having a 'porcelain gallbladder' (calcium deposits on the wall of the gallbladder). You should have your gallbladder removed if you have this.

• Having choledochal cysts (cysts found in the bile duct)

• Working in a rubber plant or metal-fabricating industry.
• Taking Methyldopa (a medicine used to treat high blood pressure), oral contraceptives (birth control) and isoniazid (a medicine used to treat tuberculosis).

• Had typhoid fever or is a carrier of typhoid.

• A history of gallbladder cancer in the family.

Statistics on gallbladder cancer
We do not have specific statistics on gallbladder cancer for B.C. Gallbladder cancer is included in "All Other Cancers" on our statistics page: bccancer.bc.ca/health-info/disease-system-statistics/statistics-by-cancer-type


Note: Available statistics do not have information about the inclusion of transgender and gender diverse participants. It is unknown how these statistics apply to transgender and gender diverse people. Patients are advised to speak with their primary care provider or specialists about their individual considerations and recommendations.

Can I help prevent gallbladder cancer?

Here are some things you can do to lower your risk of gallbladder cancer:

• **Eat healthy, nutritious foods:**
  
  

• **Stay active:**
  
Is there screening for gallbladder cancer?

There is no screening program for this cancer.

Where can I find more information?

- If you have questions about gallbladder cancer, please talk to your health care team.
- Our librarians can help you find the information you need. Visit our Library page: [bccancer.bc.ca/our-services/services/library](https://bccancer.bc.ca/our-services/services/library)