**ABSTRACT**

**Introduction:** Four ports laparoscopic cholecystectomy is the standard technique and is being advanced to reduce the number of ports. With ever increasing experience the laparoscopic cholecystectomy can be performed using three ports and even two ports. With the availability of new instruments single incision laparoscopic cholecystectomy and needlescopic cholecystectomy with micro instruments is being done. These newer techniques have also resulted in very high incidence of complications particularly bile duct injuries. The use of less number of ports to reduce postoperative pain and early ambulation is being frequently used.

**Material and Methods:** This study was carried out on a total of fifty patients suffering from gall stone disease. In twenty five patients three ports laparoscopic cholecystectomy and in rest of patients four ports laproscopic cholecystectomy was done. Observations were made in both groups regarding the condition of gall bladder, bleeding, perforation of gall bladder, bile spillage, stone spillage and bile duct injuries.

**Results:** Both groups A and B were similar in age and sex. There was no difference in mean operative time between the two groups. Statistically there was no significant difference in two groups in regards to bile and stone spillage, gall bladder rupture and hemorrhage. No bile duct injury was recorded in this study. Two patients in each group A and B were converted to open cholecystectomy because of difficulty in dissection. The overall results were told as satisfactory in both the groups.

**Conclusion:** From this study it is concluded that three ports laparoscopic cholecystectomy is a safe technique and is feasible technique for routine use. Routine use of three port laparoscopic cholecystectomy is recommended instead of four port cholecystectomy with good patient’s satisfaction.