



Image of the month

Aspiration of a Hepatic Hidatid Cyst Through a Laparoscopic Trocar[☆]



Vaciamiento de quiste hidatídico hepático a través de trocar de laparoscopia

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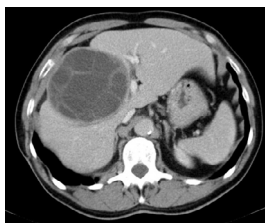


Fig. 1



Fig. 2



Fig. 3

A 50-year-old male patient reported intermittent pain in the right hypochondrium. Ultrasound of the liver detected a 10 cm walled mass. The study was completed with a CT scan, which revealed a 10×9.7×11 cm mass in liver segment VII and another mass with similar characteristics in segment V, compatible with hydatid cysts (Fig. 1). Serology was positive for echinococcosis, so a surgical cystopericystectomy was scheduled. The standard technique is based on the use of an Ochsner or Devé trocar to empty the cysts, although these trocars occasionally become obstructed, which increases the risk for leakage of the cyst contents. Instead, we decided to use a 12 mm laparoscopy trocar that was attached to the cyst with a purse-string suture and through which a cannula was connected to suction to empty the cyst, obtaining 700 ml (Fig. 2A and B). The lateral CO₂ insufflation valve was used to administer hypertonic saline solution, which was later suctioned (Fig. 3). After sterilisation and aspiration, the cystopericystectomy was performed.

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