Laparoscopic management of a giant hepatic cyst with fibrin glue

fixation of the omentum.

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Abstract:

Approximately 4.5% to 7% of the population will have simple hepatic cysts, but only 5% of these will

require treatment. Drainage options include interventional, laparoscopic, and open techniques

ranging from simple aspiration to liver resection. We present a case where a giant hepatic cyst was

treated laparoscopically and omentum was fixed in the defect using fibrin glue to prevent recurrence.

A 69-year-old female patient presented with a recurrent simple hepatic cyst after percutaneous

aspiration had failed. Her symptoms were related to the size of the cyst. Laparoscopic drainage was

performed with cyst wall excision. Omentum was fixed in the defect using fibrin glue. She was

discharged after 24 hours without complication. There are many ways to treat nonparasitic liver

cysts. The laparoscopic approach limits morbidity with excellent results. The use of fibrin glue to

secure omentum in the defect is a simple technique to limit recurrence.