

Treatment of Uncomplicated Hydatid Cyst of the Liver by Closed Marsupialization and Fibrin Glue Obliteration.

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Abstract:

Treatment of hepatic echinococcosis remains a surgical problem not only in endemic countries. Between January 1983 and December 1999 a total of 29 patients underwent surgical treatment for hepatic hydatidosis at the Department of General Surgery at the University Hospital of Granada. The diagnosis was based on clinical criteria, serology, and imaging techniques. There were 16 male and 12 female patients (ages 7-67 and 30-74 years, respectively). Concomitant extrahepatic complications were found in seven patients. Among them, five had secondary parasitic cysts in the peritoneal cavity. In one case an intrathoracic rupture was found, and one patient suffered an intraabdominal rupture with anaphylactic shock. The right lobe was affected in 62% (18 patients). Hepatic cysts were multiple in 4 cases and calcified in 13. Conservative surgical procedures were performed in 23 patients (closed marsupialization with fibrin glue obliteration in 17 and drainage-marsupialization in 6), and radical surgical procedures were undertaken in 6 (pericystectomy in 5 and hemihepatectomy in 1). One patient underwent an explorative laparotomy with intraabdominal lavage followed by pericystectomy after primary resuscitation due to anaphylactic shock. The mean period of hospitalization was 15.9 days, and there were no serious postoperative complications or fatal outcomes. The perioperative morbidity rate was 2.5%. One patient suffered a recurrence of the disease following drainage marsupialization after an interval of 5 years. Our results indicate that the closed marsupialization technique is a safe, sparing method for treating uncomplicated hepatic hydatidosis. The results were also compared to those of a former study reported by our group in which the experience of another 19 years was presented.