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**Pure laparoscopic transhepatic enucleation for mucinous cystic neoplasm abutting major hepatic veins at caval confluence**

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Number of Reviewers: **4**

Total Score: **23**

Mean Score: **5.75**

Score	Reviewer	Reject Comment	Overall Comment
6	Iswanto Sucandy		Excellent case, very technically challenging
5	Chet Hammill		Unique and interesting case.
6	Ziad Awad		Excellent video, the anatomy, technique and video quality is fantastic.
6	paresh shah		very clean video, nice dissection technique good narration rare problem so hard to generalize interesting case report and management

**Background:** Laparoscopic liver resection for tumor abutting major hepatic veins at caval confluence presents technical challenging procedure because of a potential risk of excessive bleeding and air embolism. Enucleations have been performed for benign or premalignant lesions such as cystic tumors. Herein, we present pure laparoscopic transhepatic enucleation for mucinous cystic neoplasm abutting major hepatic veins at caval confluence.

**Methods:** The patient was a 77-year-old man with a 5-cm-sized cystic mass which was located between the right hepatic vein (RHV) and middle hepatic vein (MHV) at caval confluence. Under Pringle maneuver, transection of the liver was initiated at the along the junction between the origin of the MHV and the inferior vena cava (IVC). The left boundary of the cystic mass was the MHV, careful dissection between the cystic wall and MHV was performed. After dissection of the left boundary of the cystic wall, dorsal side of the cystic mass was dissected carefully. The dorsal boundary of the cystic mass was the anterior surface of the IVC. The liver parenchymal transection proceeded to the RHV. Laparoscopic transhepatic enucleation was completed exposing the RHV and MHV as well as the IVC

**Results:** The operation time was 270 min. The estimated blood loss was 80 mL and no transfusion was necessary. A final pathological diagnosis was biliary cyst adenoma. The patient's postoperative recovery was uneventful, and he was discharged on postoperative day 5.

**Conclusions:** Pure laparoscopic transhepatic enucleation for mucinous cystic tumor at caval confluence is feasible operative procedure.

**Keywords:** Laparoscopic liver resection, Enucleation, Mucinous cystic neoplasm

<https://youtu.be/709J2jR5Qec>