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PEDUNCULATED HYDATID CYST OF THE LEFT LOBE OF LIVER; A CASE REPORT

General Surgery

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KEYWORDS

INTRODUCTION

Hydatid disease of liver is a parasitic infection caused by the organism Echinococcus granulosus/Echinococcus multilocularis. E. granulosus a.k.a. Dog Tapeworm is an accidental pathogen of human beings. Dog is the primary host and the worm scolices are excreted by it. Sheep is the intermediate host, and it is infected while grazing through fields contaminated by dog excreta with the hydatid scolices. The infection is contracted by humans through fecal contamination during close interaction with canine pets that harbor the worms. It is also common among people who rear sheep where dogs are used for herding.

Uncomplicated Hydatid cysts mostly present as an asymptomatic swelling, with the highest incidence in the liver. It can also occur in the spleen, Lung, heart and other visceral organs. Though hydatid cysts are common in occurrence, pedunculated hydatid cysts have been seldom reported in the literature. The largest pedunculated cyst to be ever recorded was 45x35x25 cm[1].

Case Report

58-year-old housewife, came to Surgery department of Government Medical College, Jalaun, with the chief complaints of Abdominal swelling for the past 2 years associated with pain for the last 6 months. History and examination of the patient revealed that the swelling was insidious in onset and slowly progressed to the current size. The swelling, which was initially painless, started to cause discomfort and pain over the epigastric and umbilical regions for the last 6 months. On examination a swelling was visible extending over the epigastrium, umbilicus and left lumbar regions (Fig 1-2). General examination was within normal limits.

Ultrasonography of the abdomen and Contrast Enhanced Computed Tomography of the abdomen which revealed a Hydatid cyst with multiple daughter cysts attached to the border of the left lobe of liver but separate from the liver. (Fig 3,4,5).

Further history of close contact with canine pets was confirmed by the patient.

Hematological investigations were conducted, and it was within normal limits.

A midline laparotomy was done, and the abdominal cavity was packed with 20%hypertonic saline soaked mops.

The cyst was found to have flimsy adhesions to the stomach, duodenum, greater omentum and the transverse colon (Fig 6). All the adhesions were released, and the cyst was mobilized all around except superiorly where it was found to be attached to the inferior border of the left lobe of liver (Fig7).

Total pericysytectomy was done and hemostasis was achieved. No spillage of the cyst occurred, and the abdomen was closed in layers with no drain placement.

The size of the cyst was measured and was documented to be 12.5cm x 9.6cm x 8cm in dimension.

Postoperatively the patient was treated with Albendazole 400mg BD X10 days . Treatment of family members with the same regimen was advised.

The overall outcome of the treatment was good, and the patient was discharged after a short period of hospital stay.

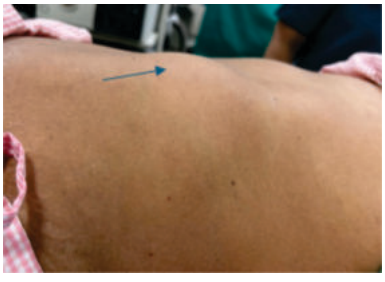

Fig. 1– Lateral View Of The Abdomen With The Lump In View (marked By Arrow).

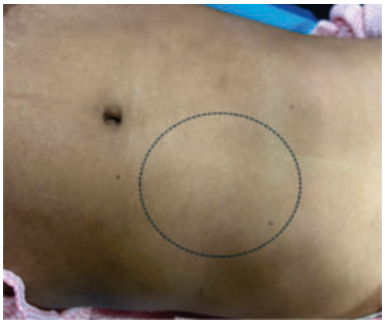

Fig. 2 – Anterior View Of The Patient's Abdomen Showing The Circumference Of The Swelling (by Dotted Circle).

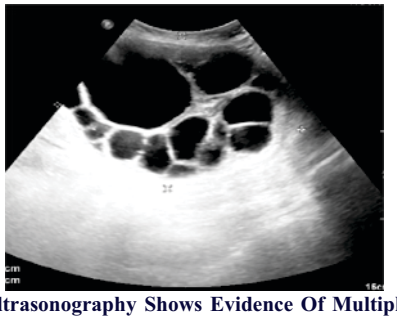

Fig.3 – Ultrasonography Shows Evidence Of Multiple Various

Sizes Heterogeneous Pre-dominantly Hyperechoic Lesion Noted In Epigastric Region Measuring Approximately 12.6 X 9.9 Cm Without Color Flow On Color Doppler Study.

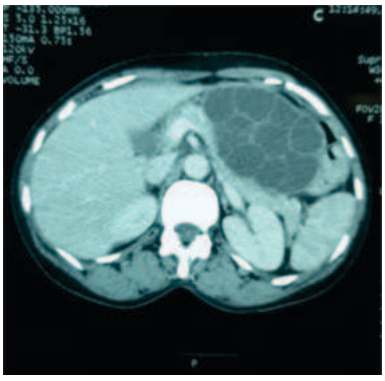

Fig. 4 – Axial Section Of Cect Abdomen Showing The Cyst Origination From The Border Of Left Lobe Of Liver.

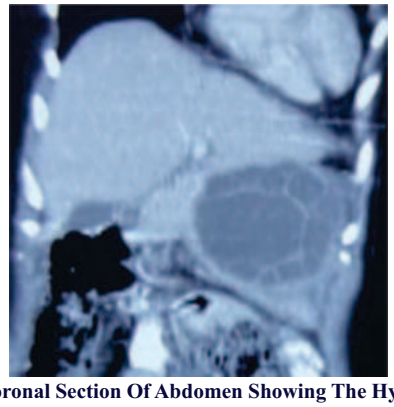

Fig. 5 – Coronal Section Of Abdomen Showing The Hydatid Cyst With Multiple Daughter Cysts Arising From The Left Lobe Of Liver.

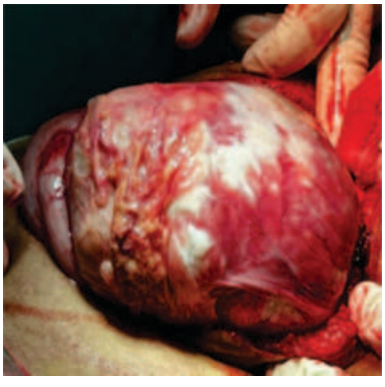

Fig. 6 – Intra-operative View Of The Cyst.

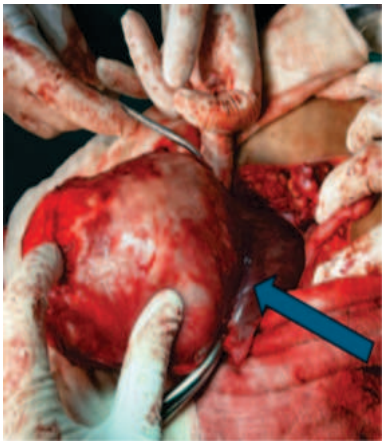

Fig. 7 – Hydatid Cyst Arising From The Inferior Border Of Left Lobe Of Liver.

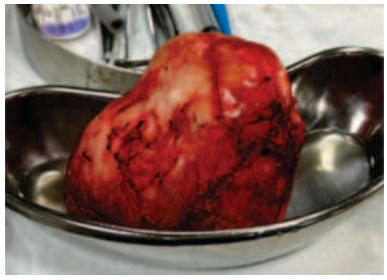

Fig 8 – Pericystectomy Done And The Specimen Of The Cyst Removed En Mass.

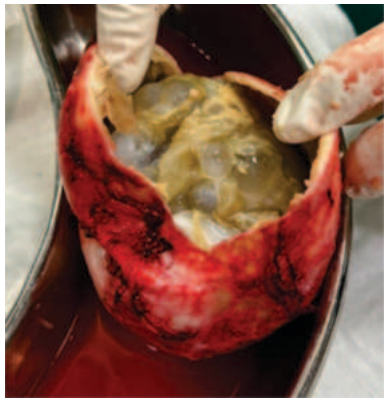

Fig 9 – Daughter Cysts Inside

Fig 10 – Multiple Daughter Cyst Seen After Opening The Cyst. Pericyst Opened And Reflected.

CONCLUSION

Though Hydatid disease a.k.a Echinococcosis is a common disease, the reports regarding pedunculated hydatid cyst arising from the left lobe of liver is seldom seen in the literature. This rarity of presentation makes this case noteworthy.

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