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Laparoscopic anatomical S3 segmentectomy by the glissonian approach

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ABSTRACT

Background: In an attempt to preserve hepatic volume in cases of severe cirrhosis, isolated resection of segment 3 (Sg3) may be beneficial [1–3]. We describe a laparoscopic anatomical Sg3 segmentectomy via an extrahepatic Glissonian approach.

Video: First, the falciform and coronary ligament were dissected. The Glissonian pedicle to Sg3 was isolated via meticulous dissection with the laparoscopic CUSA and suction catheter. After temporary occlusion, the ischemic margin of Sg3 was confirmed and the transection was performed from the medial and lateral aspects of Sg3. After the transection planes meet, hepatic venous and portal pedicle branches are controlled, and ultimately the main s3 Glissonian pedicle is ligated.

Results: Operative time was 175 minutes and the estimated intraoperative blood loss was 30 mL. On post-operative day 3, the patient was discharged without any complications. Pathologic findings demonstrated a 2.1 × 1.5 × 1.0 cm hepatocellular carcinoma (pT2) with a 0.3 cm tumor-free resection margin.

Conclusions: The laparoscopic anatomic Sg3 segmentectomy is a feasible and safe procedure for hepatocellular carcinoma. This approach may be beneficial in cases where hepatic parenchymal preservation is desired.

Supplementary data to this article can be found online at https://doi.org/10.1016/j.suronc.2019.01.014.

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