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Laparoscopic versus open approach in management of hepatic hydatid cystic disease

Hossam El Sayed El Shafey¹ and Waledd Agawee²

¹Helwan University, Egypt

²National Hepatology and Tropical Medicine Research Institute, Egypt

Introduction: Hydatid disease has a worldwide distribution and commonly seen in sheep rearing areas. Tapeworm of genus *Echinococcus* is the parasite causing the disease. The most common site of involvement is the liver. Treatment options are medical therapy, percutaneous drainage, or surgical intervention.

Objectives: Assessment of the outcome of either laparoscopic or open surgical treatment of liver hydatid cyst.

Patients & Methods: Forty eight patients with liver hydatid cysts underwent either laparoscopic or open surgical approach under cover of albendazol therapy. Both were divided in two groups according to the procedure done. The data collected were demographic data, laboratory results, radiological tests, type of surgical intervention, and post-operative data.

Results: The study involved 25 male and 23 females with a mean age of 36.76. Twenty patients (41.66%) had laparoscopic approach and 28 patients (58.34%) had open approach. Forty six patients had 1cyst and two patients had 2 cysts (P-value=0.787). According to type of operative procedure: deroofing was done in 38 patients, while resection was done in 8 patients. Only 2 patients had pericystectomy. With respect to packing of the cyst with omentum, it was applied in 23 patients of open approach group and 9 patients of laparoscopic approach group (P-value=0.013). The mean time of operation in the laparoscopic group was 74.75±18.67 minutes while in the open group was 92.24±20.94 minutes (P-value=0.004).

Conclusions: Hydatid cystic lesions of the liver can be treated either by laparoscopic or open surgical techniques with similar outcomes but with superiority of the laparoscopy due to less operative time and hospital stay.

d.hossam78@yahoo.com