

◆ IMAGEN DEL NÚMERO

Invitamos a los lectores de Acta a que envíen casos con interés clínico o diagnóstico para su publicación en esta sección.

Repair of a common bile duct injury

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After the first successful laparoscopic cholecystectomy in the late 80s, this revolutionary minimally invasive surgery rapidly became the accepted technique for the treatment of gallbladder disease worldwide. The advantages were the reduced cost, the decreased hospital length of stay, the shorter convalescence and the increased patient satisfaction.¹⁻³ The overall incidence of laparoscopic complications is also related to the experience of the surgeon. A report of over 8,800 procedures performed by 55 surgeons estimated that 90% of bile duct injuries occurred in the first 30 cases.^{4,5}

We present a 30-year-old female that was readmitted after common bile duct injury during a laparoscopic cholecystectomy. She had a 10 french transhepatic biliary drain which underwent multiple changes. At physical exam the patient was obese, with no jaundice, and her abdomen revealed small incisions and a large subcostal incision.

Laboratory was positive for a slight liver function test elevation. We recieved this patient with a transhepatic cholangiogram demonstrating distension of the common hepatic duct (Figure 1).

Figure 1. First transhepatic cholangiogram.



What is your diagnosis and which treatment would you do?

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