

Hand-assisted Laparoscopic Resection in a Patient with Hepatic Metastasis Secondary to a Colon Cancer: A Case Report [†]

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Abstract: The hand-assisted laparoscopic surgery (HALS), a newly developed resection technique, comes with various advantages while keeping a minimally invasive approach. The hand of the surgeon does the retraction and exposure of the liver while mobilizing it from its attaching ligaments, along with the fact that it can provide a rapid and effective way of tamponating a bleeding if this occurs. One of the main disadvantages while using the classical laparoscopic approach remains the difficulty of exposure and retraction, the high risk of developing air embolism or massive bleeding, and of course, the loss of the tactile palpatory sense. We present the surgical hand-assisted resection technique, which was used in a patient with multiple hepatic metastases secondary to chemo-treated colon cancer. A 79-year-old female patient with a history of chemotherapy presented to the general surgery unit of the St. Constantin Hospital Braşov with signs of hepatocytolysis, intrahepatic cholestasis, and jaundice. The clinical, laboratory, and imaging tests confirmed the presumptive diagnosis of hepatic metastasis following the surgical procedure. Despite the fact that the patient had a relapse of the disease and numerous hepatic metastases, we highlight the fact that the liver metastasectomy was fully performed without the need for open surgery just by using HALS. The major advantage of HALS is that the combined approach offers a safe, effective, and rapid liver resection without the major risks of open surgery. The laparoscopic approach is both safe and feasible in various cases and can offer many benefits, such as the relatively short hospitalization period. These facts do not interfere with the clean resection margins and with the perioperative morbidity rates.

Keywords: liver resection; hepatic metastasis; hand-assisted laparoscopic surgery.

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Conflicts of Interest

The authors declare no conflict of interest.