

## **EP-015**

## IATROGENIC BILE DUCT INJURY ASSOCIATED WITH ANOMALIES OF THE RIGHT HEPATIC SECTIONAL DUCTS FOLLOWING LAPAROSCOPIC CHOLECYSTECTOMY

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**Background**: Bile duct injuries remain one of the most devastating complications of both open and laparoscopic cholecystectomy (LC). Although laparoscopic cholecystectomy has been widely accepted as the standard operation, it continues to have a high complication rate than open cholecystectomy. Bile duct injury with LC has often been attributed to surgical inexperience, but it is also clear that aberrant bile ducts are present in a significant number of patients who sustain biliary injuries during these procedures.

**Methods**: We present seven cases of right sectoral duct injuries for 10 years We reported the management of right sectoral duct injuries and its results

**Results**: We present seven cases (0.15%) of right sectoral duct injuries, three of which had right posterior sectoral duct (RPSD) injuries noted on cholangiogram, while two of right anterior sectoral duct(RASD) and RPSD injury noted on postoperative percutaneous transhepatic cholangiography(PTC). In the first three cases, Intraop cholangiogram demonstrated aberrant biliary anatomy and injuries to low-lying RPSDs drain to cystic duct. These cases was successfully recognized and repaired immediately by hepaticojejunostomy. Two of RASD and two of RPSD injury noted on postoperative period. One of RPSD injury case was performed delayed hepaticojejunostomy after PTBD. The postoperative course of these patients was uncomplicated. The other 3 cases were successfully performed intrahepatic bile duct ablation using coiling, fibrin glue and alcohol (ethanol) for 5, 23 and 25 times.

**Conclusions**: We present seven cases (0.15%) of right hepatic duct injuries which occurred during LC for 10 years. If RHSD injury noted on postoperative period, Although a repeat procedure may be necessary, the obliteration of bile ducts is a safe procedure with excellent results in patients with complications from isolated segmental ducts.

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