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Image of the month

Single hepatic vein, anatomical risk variant for hepatectomy☆

Vena suprahepática única, variante anatómica de riesgo en la hepatectomía

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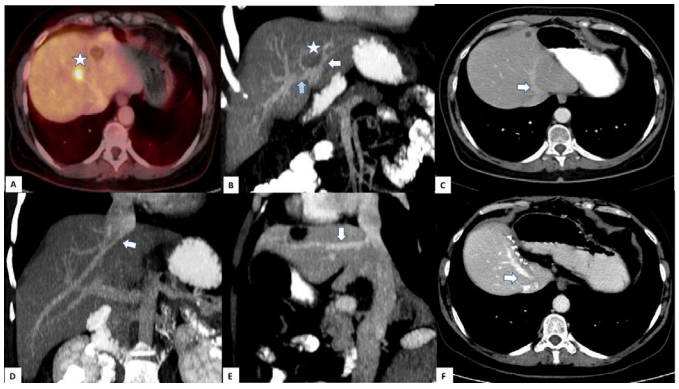

Figure 1

A 52-year-old woman with a history of left colectomy due to T3N1M1 adenocarcinoma, presented a liver lesion in segment IV that restricted diffusion (Fig. 1A and B), with the presence of a single suprahepatic vein (Fig. 1C–E). We performed left hepatectomy extended to segment VIII (histology: colorectal metastasis) due to left portal involvement and confirmed the anatomical variant intraoperatively, which required careful ultrasound-guided liver dissection. A postoperative CT scan confirmed the preservation of the hepatic venous drainage (Fig. 1F).

The single suprahepatic vein is exceptionally rare. However, knowledge of it, a meticulous surgical technique and radiological reconstruction are essential to avoid iatrogenesis.

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