



Video of the month

Laparoscopic hybrid mini-alpps using transmesenteric intra-operative portal embolization for locally advanced intrahepatic cholangiocarcinoma

Mini-alpps híbrido laparoscópico usando embolización portal intraoperatoria transmesentérica para colangiocarcinoma intrahepático localmente avanzado

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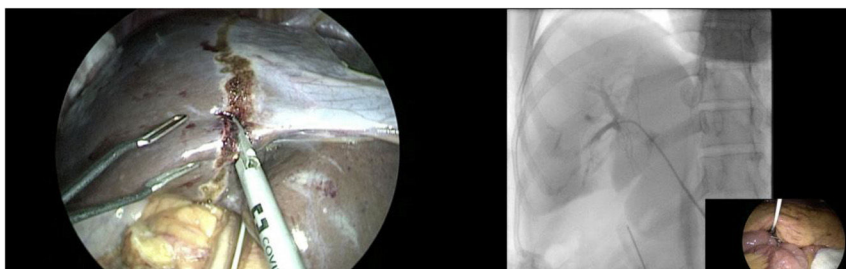


Figure 1

The video shows the treatment of a 43-year-old patient with a 10 cm solid hypovascular lesion involving the entire right hepatic lobe and segment IV with involvement of the right and middle suprahepatic vein in intimate contact with the retrohepatic vena cava. Preoperative future liver remnant (FLR) volumetry was 360 cm³ (22%). A hybrid mini-ALPPS with intraoperative right portal embolisation via the inferior mesenteric vein was performed. At 14 days, volumetry demonstrated FLR of 854 cm³ (237% increase). On day 21, right trisectorectomy with partial resection of the vena cava was performed. The postoperative period was uneventful, and the patient was discharged on the 5th day after surgery.

Histopathology showed 9 cm moderately differentiated intrahepatic cholangiocarcinoma with infiltration of the vena cava and no lymph node metastasis in 0 of 9 resected cases (pT4N0M0, stage IIIB of the 8th TNM) (Fig. 1).

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi: <https://doi.org/10.1016/j.cireng.2023.10.004>.

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