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A Decade of Laparoscopic Hepatic Surgery: From Cyst Fenestration to Right Hepatectomy for Living Donor Liver Transplant[☆]



Una década de cirugía hepática laparoscópica: de la fenestración de quistes a la hepatectomía derecha para trasplante de donante vivo

Dear Editor,

The first laparoscopic hepatic surgery was performed in our country in the year 2000.¹ A short time afterwards, at our hospital we began to apply the laparoscopic approach in liver surgery with the fenestration of simple cysts. In 2004, we performed our first left lateral segmentectomy due to a single metastasis of CRC. Since then, we have extended the indications to include lesions located in unfavorable segments and, later, to major hepatectomies.

In November 2012, we published in *CIRUGÍA ESPAÑOLA* our experience with 71 resections of solid lesions.² Compared with open surgery, our results,³ similar to those of other authors,^{4,5} show how the laparoscopic approach provides benefits in patients that go beyond mere esthetics or shorter hospital stays: less bleeding, less need for transfusion and a lower rate and severity of complications.

One decade later and after more than 100 completely laparoscopic liver resections, we have applied the advantages of this approach to a liver donation for adult transplantation, which is a case we recently reported.⁶ The recipient was 69 years old and had cryptogenic cirrhosis. This patient presented encephalopathy and refractory ascites with 2 episodes of spontaneous bacterial peritonitis, type 1 hepatorenal syndrome and 3 HCC within the Milan criteria. The Child–Pugh score was B-9 and MELD score was 15. The 29-year-old son of the patient, who weighed 74.4 kg, voluntarily offered to be a donor. The right hepatectomy of the donor was performed with a completely laparoscopic approach, extracting the graft through a suprapubic incision. The duration was 480 min, with a blood loss of less than 100 ml. The postoperative stay was

4 days. After discharge, the patient showed no need for analgesia and presented a quick and excellent recovery, with no complications within the 90 days after the procedure. It is a unique case, and one should not draw conclusions any further than those related to the feasibility of the procedure. Nonetheless, it does cause us to contemplate how, in just over a decade, we have witnessed the evolution of laparoscopic liver surgery from the fenestration of simple cysts to the most complex procedures. This approach has come of age and has become solidly established in several hospital centers in our country.⁷⁻⁹

Conflicts of Interest

The authors have no conflicts of interest to declare.

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