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MODALITATE DE ABORD IN TRATAMENTUL LITIAZEI CAILOR BILIARE INTRAHEPATICE

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Litiaza cailor biliare intrahepatice (CBIH) reprezinta in statele vestice o entitate clinica rara , cu incidenta in crestere in ultimele decade in seriile de cazuri raportate, odata cu cresterea sensibilitatii metodelor diagnostice. Etiologia este neclara , dar asocierea dintre staza biliara si infectie sunt factori determinanti .Tratamentul este complex, scopul tratamentului este obtinerea statusului "stone-free", decomprimarea arborelui biliar si controlul infectiei. Ca prima optiune se propune derivatia biliara asociata sau nu cu rezectia hepatica , ca si alternativa non-invaziva se enumera abordul endoscopic retrograd sau litotritia percutana. Prezentam cazul unei paciente diagnosticate in urma unui puseu de angiolita cu litiaza de CBIH cantonata la nivelul segmentelor VII , VIII hepatice .Tratamentul chirurgical a presupus abordul bipolar al cailor biliare intrahepatice prin segmentectomie hepatica si coledocotomie si extractia bipolară a calculilor, urmata apoi de sfincterotomie endoscopica.

APPROACH IN TREATMENT OF PRIMARY INTRAHEPATIC LITHIASIS

Primary intrahepatic lithiasis represents in western countries a rare clinical feature with an increase in incidence. The etiology is unclear but the association of biliary stasis and infection are determinant factors for stone formation. The treatment is complex, and the goal is to promote complete stone clearance, decompression of the biliary tree, and control of bile infection. Most groups propose surgical treatment with bilioenteric anastomosis and/or liver resection as the first approach and nonsurgical procedures such as percutaneous cholangioscopic lithotripsy or endoscopic therapy. We present the case of a patient diagnosed with intrahepatic lithiasis after an episode of cholangitis. The surgical approach consisted in a hepatic resection combined with bipolar exploration of bile ducts and extraction of bile stones.
