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VISCERAL SURGERY VIDEOS

Glissonian approach during hepatectomy (with video)



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KEYWORDS

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Clamping;
Bilar fistula;
Right hepatectomy

Thanks to the development of clamping techniques [1] and the introduction of the concept of residual liver after hepatectomy (volume, nature, function), liver resections have become increasingly safer over time. To facilitate liver resection, a technique of glissonian approach was developed [2]. The glissonian approach during hepatectomy is a selective vascular clamping procedure reproducible requiring preoperative imaging data study and intraoperative ultrasound Doppler [3] and permeability with US air test [4]. In practice, this approach is feasible in about 80% of patients due to portal anatomical abnormalities.

This video shows different steps necessary to perform a right glissonian control. The right glissonian control is achieved using a dissector at right angles. The dissector is inserted from a point at the upper side in the hilar plate of the middle part of the convergence around the right glissonian pedicle to emerge on the other side to the underside of the hilar plate, slightly remote peritoneal reflection at the front side junction segments I-VI. This video also shows a more selective control. Selective control glissonian right posterior pedicle sector is made from a point located on the right side of the gallbladder fossa at the anterior edge of the Rouviere sulcus to the right-hand side of segments I-VI. This didactic video (Fig. 1) is potentially useful for all surgeons who need to control right glissonian pedicle.

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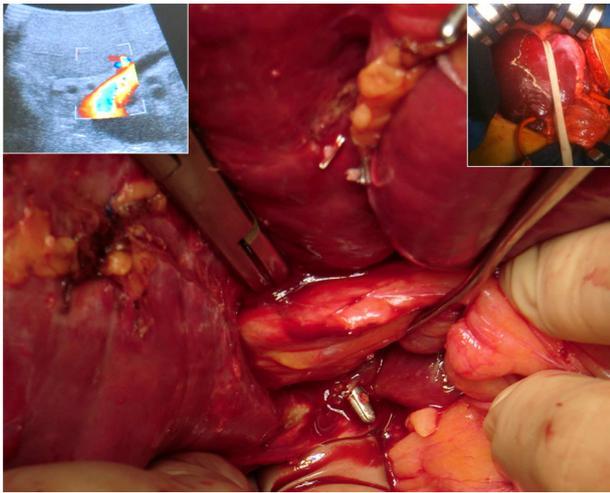


Figure 1. Video extract.

Disclosure of interest

The authors declare that they have no conflicts of interest concerning this article.

Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at <http://dx.doi.org/10.1016/j.jviscsurg.2015.02.006>.

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