## International Journal of Surgery 11 (2013) 1022-1023



Contents lists available at SciVerse ScienceDirect

## International Journal of Surgery

journal homepage: www.journal-surgery.net



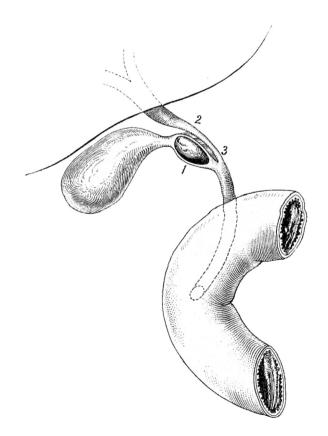
Letter to the Editor

## Was Mirizzi really the first person to recognize Mirizzi syndrome?



Sir,

It is generally accepted that in 1948 PB Mirizzi was the first to describe common hepatic duct obstruction caused by extrinsic compression from a stone in the cystic duct. This type of biliary obstruction was thereafter named Mirizzi syndrome, and later became Type I Mirizzi syndrome as new variants were identified. In 1982 McSherry et al. described Type II Mirizzi syndrome resulting from a fistula between the gallbladder and the common hepatic duct caused by stone in the gall bladder.<sup>2</sup> In 1989 Csendes et al. reclassified Mirizzi syndrome into 4 types; Types II, III and IV were versions of McSherry's fistula variant but with fistula defects of differing sizes (<33%, 33-66% and >66% of the CBD diameter



Source: Kehr H. Cholelithiasis. In: Brugsch Th, Eppinger H, Karewski F, Kehr H, Unger E.(Eds). Speziele Pathologie und Therapie innerer Krankheiten. VI. Band, 2. Hälfte: Erkranungen des Verdauugs-apparates, III. Teil: Leber- Peritoneum. Urban & Schwarzenberg, Berlin-Wien 1923. p 9.

respectively).3 In 1997 Nagakawa et al. suggested a new classification of Mirizzi's syndrome. Types I and II were unchanged, Type III was defined as hepatic duct stenosis due to a stone at the confluence, and Type IV due to hepatic duct stenosis as a complication of cholecystitis in the absence of calculi.4

Not to feel left out, Csendes further expanded the classification in 2007 adding type V to his previous system; these were cases with an additional cholecystoenteric fistula without (Type Va) or with (Type Vb) a gallstone ileus.<sup>5</sup>

However, "Mirizzi syndrome" had already previously been recognized by Hans Kehr in 1923, 25 years earlier. 6 Kehr gave a wonderful illustration of this pathology (Figure 5, Page 9) below which was written: "A stone in the cystic duct lying parallel with the compressed common hepatic duct in segments 2 and 3. In case of inflammation in parts 1, 2 and 3 the common hepatic duct becomes almost impassable".

The illustration demonstrates that the common hepatic duct and both hepatic bile ducts are dilated due to common hepatic duct obstruction, as one sees in obstructive jaundice. Thus I believe that Hans Kehr deserves the credit for first describing obstructive jaundice secondary to a stone in the cystic duct.

However, because common hepatic duct obstruction caused by cystic duct stones is already so firmly associated with the name of Mirizzi, it might be a fairer compromise to instead rename this pathology Kehr-Mirizzi syndrome.

I am again reminded of the wealth of our medical literature and that we should maybe read our older texts with a little more care and attention.

Ethical approval No.

**Funding** 

No.

Author contribution One author only.

Conflict of interest No conflicts of interest.

## References

- 1. Mirizzi PL. Sindrome del conducto hepatico. G Int Chir 1948;8:731.
- 2. McSherry K, Ferstenberg H, Virhup M. Mirizzi syndrome: classification and surgical therapy. Surg Gastroenterol 1982;1:219–25.
- Csendes A, Diaz JC, Burdiles P, Malnenda F, Nava O. Mirizzi syndrome and cholecystobiliary fistula: a unifying classification. Br J Surg 1989;76:1139-43.

1023

Letter to the Editor / International Journal of Surgery 11 (2013) 1022–1023

- 4. Nagakawa T, Okta T, Tayahara M, Keno K, Korishi I, Sanada H, et al. A new classification of Mirizzi syndrome from diagnostic and therapeutic viewpoints. Hepato-Gastroenterology 1997;**44**:63-7.

  5. Csendes A, Munoz C, Alban M. Sındrome de Mirizzi Fıstula colecistobiliar – una
- Schides A, Mulloz C, Albali M. Shidroine de Milizzi Fistula Colectstobiliai dha nueva clasificacion. Rev Chil Cir 2007;59(Suppl.):63–4.
   Kehr H. Cholelithiasis. In: Brugsch Th, Eppinger H, Karewski F, Kehr H, Unger E, editors. Speziele Pathologie und Therapie innerer Krankheiten. Hälfte: Erkranungen des Verdauugs-apparates, Ill. Teil: Leber- Peritoneum, VI. Band, 2. Urban & Schwarzenberg, Berlin-Wien; 1923. p. 9.

Radoje Colovic, Professor Medical Faculty University of Belgrade, Dr Subotic 8, 11000 Belgrade, Serbia

E-mail address: marcolov@sbb.rs

5 April 2013 Available online 1 June 2013