

Segment IVb and V hepatic resection with lymphadenectomy in early stage gallbladder cancer.

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Introduction:

Gallbladder cancer(GBC) is one of the very poor prognostic cancer. At the symptomatic time, it has usually no longer curable stage. Early stage diagnosis with extensive surgical resection are the appropriated management for selected patients. We presented patients who received benefit from this approach.

Methods:

A 55 year-old man had no abnormal symptom who was investigated by abdominal ultrasonography for yearly check up which was reported a infiltrative lesion at gallbladder. Subsequently CT abdomen suspected GBC without lymph node enlargement or distant metastasis.

Results:

Segment IVb and V hepatic resection with lymphadenectomy was performed in this patient. During operation, frozen section of cystic duct margin was reported negative. Pathological report revealed well-differentiated adenocarcinoma which involved muscular layer(T1b), free all resection margin and negative all 23 lymph nodes(group 8, 12 and 13).

Between July 2011 to June 2012, 5 asymptomatic patients were diagnosed early stage GBC in our institute which was managed by this approach. 3 cases were in stage I(T1b) and remaining 2 cases were stage II. All of them had no post-operative complication and are in follow up process.

Conclusions:

Radical resection including cholecystectomy with en-bloc hepatic resection and lymphadenectomy is only potentially curative treatment for early stage gallbladder cancer.