

## Obstructive jaundice secondary to a hepatic hydatid cyst

Key words: Hydatid cyst. Obstructive jaundice. ERCP.

Dear Editor,

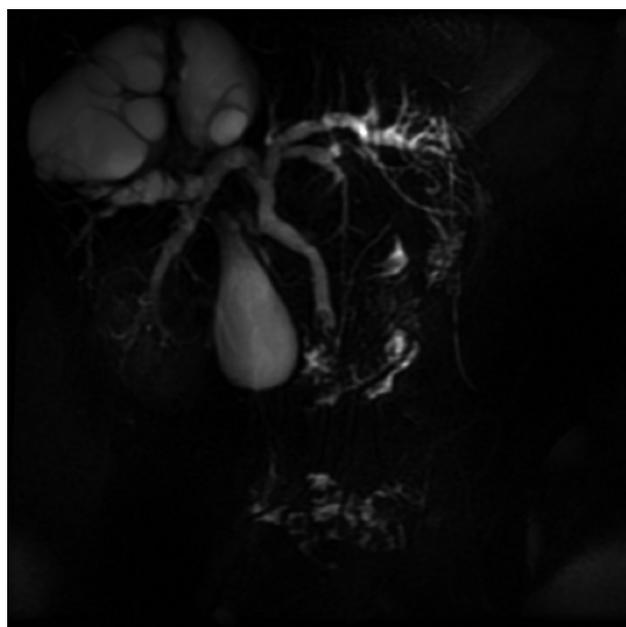
The rupture of a hepatic hydatid cyst into the intrahepatic bile ducts is one of the most common and serious complications of hepatic hydatidosis and occurs in 5-25% of cases. (1-3). Endoscopic retrograde cholangiopancreatography (ERCP) plays an indisputable role in the diagnosis and treatment of this condition.

### Case report

A 43-year-old female patient presented to the Emergency Room due to a four-day history of abdominal pain in the right upper quadrant, nausea and mucosal jaundice. Laboratory test showed bilirubin levels at 9.6 mg/dl, leukocytosis and eosinophilia. An abdominal ultrasound showed a 10 cm complex cystic lesion that was suggestive of a hydatid hepatic cyst and dilated intra- and extrahepatic bile duct, with echogenic material in the distal common bile duct. Magnetic resonance imaging (MRI) cholangiopancreatography confirmed these findings. A hepatic cystic lesion was seen in the right hepatic lobe near the biliary tree with multiple vesicles inside and a dilated intra- and extrahepatic bile duct with a defect that occupied the distal common bile duct (Fig. 1). Hydatid serology was positive and therefore, treatment with albendazole was initiated. ERCP was performed that confirmed a global dilatation of the biliary tree and an intra common bile duct filling defect. After sphincterotomy, a hydatid vesicle was removed with a Dormia basket.

### Discussion

Most cases of hepatic hydatidosis are asymptomatic. The most common complication is rupture into the biliary tree (3,4). Exclusive medical pharmacotherapy with benzimidazoles (1,3,5) (albendazole and mebendazole) is used in



**Fig. 1.** Colangio-RM with a hydatid cyst in the LHD and hydatid vesicles in the distal common bile duct that produced obstructive jaundice.

special cases where surgical or percutaneous treatment is not suitable. These can also be used as an adjunct to surgical and percutaneous treatment with the administration of scolicidal agents.

ERCP is indicated for the treatment of biliary complications that occur before or after surgery. ERCP is a useful and safe procedure for the diagnosis and treatment of biliary complications of hepatic hydatidosis.

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DOI: 10.17235/reed.2018.5574/2018

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