

**P029**

## **Radical Excision for huge hepatic cystic neoplasm by totally laparoscopic liver resection: A case report**

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**Introduction** : Laparoscopic liver resection (LLR) has become increasingly popular and reliable in the field of hepatobiliary surgery. However, the procedure has demand the technique and experience of the surgeon on both laparoscopic and open liver surgery. Because of the lack of space and difficulty for handling of liver, LLR is hard to apply for huge hepatic mass. I introduce the case of LLR for huge hepatic cystic neoplasm in this case.

**Methods** : A 25-year-old male who had developed right upper abdominal pain with 2 weeks had revealed 15\*8 cm sized huge and multiple cystic neoplasms with multiple internal septation focal enhancing portion located in segment 4, 5 and 6 by imaging studies. His body mass index (BMI) revealed 37.4 kg/m<sup>2</sup>, but he has no comorbidity except obesity and no abnormality on laboratory findings.

**Results** : He underwent totally laparoscopic S4b/S5/S6 trisegmentectomy with cholecystectomy. Operation time was 445 minutes and intraoperative estimated blood loss was 970mL. The retrieved specimen through suprapubic incision was measured by 18.0\*17.0\*9.5cm and 880 gm. Final pathology revealed pleomorphic sarcoma, most-likely leiomyosarcoma which was 16.0\*11.0\*9.0 cm with FNCLCC grade 3 and no involvement for resection margin. He discharged at postoperative 9th day without problem.

**Conclusions** : Primary hepatic leiomyosarcoma is very rare soft-tissue tumor. Even though rarely been reported in this tumor, hepatic resection is associated with encouraging rates of overall and disease-free survival. When huge hepatic cystic neoplasm is hard to distinguish between benign and malignancy before operation, LLR can be a choice for diagnosis and treatment like this case.

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