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Pure laparoscopic donor right hepatectomy in donor with severe portal vein anomaly

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Introduction : Donor operation in adult-to-adult living donor liver transplantation(AALDLT) is still associated with postoperative morbidity. But, laparoscopic donor hepatectomy is sporadically reported in a few center with substantial experience and pure laparoscopic donor right hepatectomy(PLRH) has been gradually increased because of cosmetic satisfaction and rapid recovery, despite the controversial issues.

Methods : We present PLRH in donor with severe portal vein anomaly. A 57 year old man volunteered to living liver donation for his wife who suffered from hepatic encephalopathy related with cirrhosis. Donor's portal vein was unusual type on preoperative computed tomography; Nakamura type - single non-bifurcating portal vein variation

Results : Right hepatic artery and hepatic duct were single. Right posterior portal vein and S5 branching portal vein were meticulously dissected and encircled with vessel loops before liver parenchymal transection, and S8 branching portal vein was identified after right hepatic duct transection. Three portal veins were reconstructed to one orifice during bench work procedure. Donor's and recipient's portal vein were patent, postoperatively.

Conclusions : PLRH seems to be a feasible procedure when performed by a highly experienced surgeon, but careful preoperative evaluation and preparations are essential. Laparoscopic donor hepatectomy is being tried consistently and PLRH can be cautiously expanded to donors with hepatic anatomic variations.

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