

## 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 a patient who received benefit from this approach.

**Methods:** A 55 year-old man had no abnormal symptom who was investigated by abdominal ultrasonography for yearly checkup which was reported a infiltrative lesion at gallbladder. Subsequently CT abdomen suspected early stage 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 lymph node positive 1 in 23 nodes. Post-operative course was uneventful. Patient was discharged on 5th post-operative day. Now, he is doing well at 12 months after operation and adjuvant chemotherapy.

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