Pure Laparoscopic Right Hemihepatectomy Anterior Approach

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With many reports on encouraging outcomes, laparoscopic liver resection has been accepted as attractive alternative for open liver resection. However, still laparoscopic right hemihepatectomy is considered as difficult procedure. The 1st and 2nd consensus meeting on laparoscopic liver resection has stated that major resection has a still risk associated with its novelty. With the accumulation on the experiences of laparoscopic liver resection, this procedure is more widely performed than before. And the postoperative outcome after the HCC treatment is encouraging in many reports.

Anterior approach during right hemihepatectomy has been considered oncologically beneficial in some reports. The liver resection without mobilization of the right liver could be difficult as we do not know the boundary of the posterior part of the liver. And hanging maneuver cannot be applied during this approach.

The advantage is the operation time for mobilization of the right liver can be saved. The right hepatic vein control will be performed in later stage of the operation. Oncologic advantage proposed in open surgery will be shown in laparoscopic surgery as well.

Recent development of equipment of laparoscopic surgery has made laparoscopic liver resection more safe and meticulous than before. High-quality image, 3 D image and powerful energy device make parenchymal dissection more precise and less bloody.

When laparoscopic right hemihepatectomy is planned, anterior approach can be alternative option.