

Prehepatocholedochal Proper Hepatic Artery. Rare Anatomical Variant. Surgical Considerations.

Case Report

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Abstract

In classical anatomic variants, the proper hepatic artery (PHA) continues the common hepatic artery (CHA) after the gastro duodenal artery (GDA) detaches itself and divides into the right hepatic artery (RHA) and left hepatic artery (LHA), the proper hepatic artery being located to the left of the hepatocholedochal duct (HCD). This paper presents an abnormal positioning of the PHA placed before the HCD with an increased diameter of about 5-7 mm, which could be confused with the HCD. We present the case of a 57 year-old woman diagnosed with acute lithiasic cholecystitis, associated with hypersplenism and hypertension. The literature mentions manifold anatomical variants of arterial liver vascularization, including PHA. For this reason, this paper presents an overview of similar cases that can be found in medical literature. The aforementioned case is a rare topographic anatomy for the PHA that can easily pass for HCD especially during celioscopy, therefore it is crucial for this to be acknowledged by all surgeons.

Key words: proper hepatic artery, topographic variants, cholecystectomy

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