

Bipartite liver: an incidental rare anomaly of the liver

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Bipartite liver is a rare congenital anomaly without phylogenetic significance, which needs to be known for the potential risk of torsion or internal gastrointestinal herniation and also in the pre-operative planning of liver surgery, being potentially associated to complex surgical dissection of the hepatic hilum.

A 77-year-old woman presented with recurrent episodes

of right upper-quadrant abdominal pain and weight loss. During the diagnostic workup a computed tomographic scan showed a cholangiocarcinoma of segment six and gallstones, in the context of a bipartite liver where otherwise normal right and left lobes were distinctly divided from each other by a bridge of tissue (*Figure 1*).

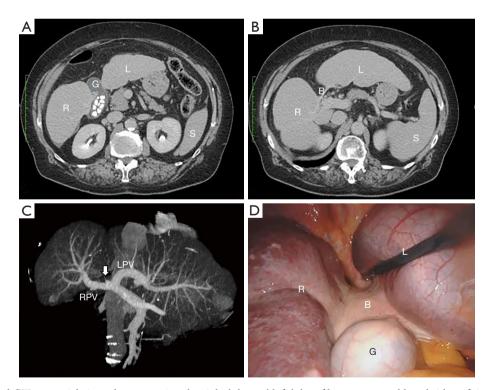


Figure 1 Abdominal CT-scan axial views demonstrating the right lobe and left lobe of liver connected by a bridge of tissue (A,B); abdominal CT-scan coronal view demonstrating the portal vein trifurcation with the sketch of the portal branch for hypoplastic segment IV (arrow), the RPV and LPV (C); intraoperative views of the bipartite liver with the right lobe and left lobe connected by a bridge of tissue (D). R, right liver lobe; G, gallbladder; L, left liver lobe; S, spleen; B, bridge connecting liver lobes; RPV, right portal vein; LPV, left portal vein.

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A robot-assisted hepatic segmentectomy and cholecystectomy with the use of indocyanine-green cholangiography and intraoperative ultrasound were performed.

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Footnote

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