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Ectopic liver tissue in Meckel's diverticulum

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Ectopic liver is an extremely rare entity with an incidence of 0.2-0.4% and a prevalence of 0.4%. Literature is pause on hepatic ectopia, the commonest ectopic location being gall bladder. We report a case where hepatic tissue was detected histologically in a Meckel's diverticulum. A 17 year old Caucasian male presented with acute onset central abdominal pain, constipation, vomiting and inability to pass flatus for two days. Examination revealed a distended abdomen with right upper quadrant tenderness, localized peritonism, a positive succussion splash and absence of bowel sounds. A computerized tomographic scan of the abdomen showed small bowel obstruction suspicious for volvulus over a band adhesion. Emergency laparotomy was performed with extensive adhesiolysis and partial resection of small bowel with functional end to end anastomoses. Histology is consistent with Meckel's diverticulum with ectopic hepatic tissue. Patient had ileus post operatively which delayed discharge, otherwise he recovered uneventfully. Here we describe a case of ectopic liver tissue that was incidentally identified histologically in a Meckel's diverticulum, when partial bowel resection was performed for small bowel volvulus secondary to a band adhesion that developed years post congenital surgery for gastroschisis in a young male. This presentation is a unique incidental finding that has never been reported before in English literature to our knowledge. There have been cases reported of macroscopic ectopic liver tissue in gall bladder, kidney, right atrium and even in inferior vena cava. Rarely are they associated with complications requiring intervention.

Biography

Venkata Seelamanthula has completed his Graduation from Kathmandu Medical School and has obtained MRCS from Royal College of Surgeons, Edinburgh. He is currently working as a Registrar in General Surgery at Caboolture Hospital, Queensland, Australia. He is also working as Associate Lecturer at the University of Queensland.

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