

**Laparoscopic Treatment of a Hepatic Subcapsular Abscess Secondary to Gallbladder Perforation:
Case Report**

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Abstract

We present a rare case of type II Niemeier gallbladder perforation (GBP) developed as a complication of acute calculous cholecystitis. A 76-year-old man was admitted to our surgical unit with the presumptive diagnosis of acute cholecystitis. CT scan revealed a subcapsular collection developed on the visceral surface of the right hepatic lobe. It was communicating through a thin hypodense band with the cystic duct, distal to an impacted stone. Through laparoscopy the collection was confirmed to be a subcapsular liver abscess secondary to GBP. The cholecystectomy and the abscess cavity treatment were completely handled via laparoscopic approach. The paper demonstrates that laparoscopic approach can be a safe and feasible method in order to treat both the cause and the complication in this situation. Early diagnosis and appropriate minimally invasive approach are the key to manage this rarity.

Key words: type II gallbladder perforation, subcapsular liver abscess, acute calculous cholecystitis

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