Chirurgia (Bucur). 2015;110(6):559-561

Biliary Lithiasis with Choledocolithiasis in Children

R.N. Bălănescu[1,2], L. Bălănescu[1,2], G. Drăgan[1], A. Moga[1], R. Caragață[1]
[1]Department of Pediatric Surgery, "Grigore Alexandrescu" Clinical Emergency Hospital for Children, Bucharest, Romania
[2]"Carol Davila" University of Medicine and Pharmacy, Bucharest, Romania

Abstract
Although biliary lithiasis has been considered a less common pathology in the pediatric population than in adults, in recent years, it has increasingly been diagnosed in children, with a prevalence of between 0.13 to 0.22. The elective treatment of symptomatic biliary lithiasis is cholecystectomy, the laparoscopic approach being considered the "gold standard. We present 3 cases referred to our clinic with biliary lithiasis, in which we performed laparoscopic cholecystectomy. We performed intraoperative cholangiography with a 4 Fr transcystic catheter. In the first case, the cholangiography showed a dilated CBD, without obstruction. Considering the patient's history, with recurrent episodes of choledocal lithiasis, we decided to perform a transcystic drainage. In the second case, cholangiography showed a normal CBD and no obstruction. In the third case cholangiography could not be performed due to technical issues. In all cases we performed retrograde laparoscopic cholecystectomy. The postoperative evolution in all cases was favorable. Studies conducted in the last years showed that laparoscopic cholecystectomy is a safe and efficient approach in the management of symptomatic biliary lithiasis in the paediatric age group. The management of choledoco-lithiasis is still not well defined: perioperative ERCP with ES, intraoperative cholangiography or intraoperative ultrasound were proposed as options in exploring the biliary tree.
Key words: cholecystectomy, laparoscopy, intraoperative cholangiography