HYDATIC CYST IS A STILL A PROBLEM: A SINGLE CENTER EXPERIENCE OF 10 YEARS

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Objectives

Hydatid cyst is caused by a small cestode tapeworm E. granulosus. It may develop in almost any part of the body. The location is mostly hepatic (75%) and pulmonary (15%), and only 10% occur in the rest of the body. Its treatment is based on surgical resection which can be done cystectomy or with partial organ resection. Its diagnosis is only based on pathological examination. Our aim is to determine the epidemiological and clinicopathological features of Hydatid cyst.

Materials and Methods

In the present study, we present our experience with located hydatid disease diagnosed and treated between 2007 and 2017 in the Pathology Department of Antalya Training and Research Hospital, Antalya, Turkey.

Results

In the retrospective analysis, this study involved a total of 129 cases. The ages of affected patients ranged from 3 years to 76 years with a mean age of 41.4 years. The female to male ratio was 1.5/1. Revised and re-confirmed 129 cases of the diagnosis, 79 were located in liver, 29 in the lungs, 7 in the spleen, 4 in the soft tissue, 2 in the heart, 2 in the kidney, 1 in the neck midline location, 1 in the appendix, 1 in both liver and lungs, 1 in the pancreas, 1 in the bladder, 1 in the ovary location. One hundred twenty nine patients underwent surgical resection which was total cystectomy resection in 104 and with partial organ resection in 25.

Conclusions

Organ-preserving surgical procedures are the currently effective and safe “first line” management. Hydatid cyst disease is still a problem in Turkey, as well as in many other places in the world.

Anahtar Kelimeler: Hydatid Cyst, Problem, Single center experience