



Laparoscopic Resection Of Gastroduodenal Artery Aneurysm

Jae Do YANG^{*1}, Hee Chul YU¹, Mi Rin LEE¹

¹*Surgery, Jeonbuk National University Hospital, REPUBLIC OF KOREA*

Background : Gastroduodenal artery (GDA) aneurysms are very rare. Depending on the mechanism of formation and etiologic factors, they can be divided into true aneurysms or pseudoaneurysms. Though the diagnosis has been made incidentally, any GDA aneurysm should be considered for definitive treatment cause of rupture risk.

Methods : Endovascular intervention has gained popularity for its safety and efficacy. However, the surgical treatment can be safe and feasible in selective patient depending on the situation. We report herein the successful laparoscopic surgical resection of 2-cm sized true GDA aneurysm

Results : A 63-year-old female came to our outpatient clinic with interrupted epigastric pain during 1month. Physical exam revealed mild tenderness of the right upper quadrant. An abdominal computed tomography scan from outside hospital revealed a GDA aneurysm 2 cm in diameter and calculous cholecystitis with stone 1.4cm in diameter. Because the patient had wanted surgical resection of GDA aneurysm at the same time as cholecystectomy, endovascular intervention was excluded, and a laparoscopic treatment was scheduled. there were no difficult problems during laparoscopic procedures. Postoperatively, there were no clinical symptoms or laboratory evidence of hepatic function impairment or pancreatitis. The patient was discharged on postoperative day 4 without any other problems.

Conclusions : In conclusion, GDA aneurysms are rare and carry a significant risk of a life-threatening rupture. The treatment should be considered once the diagnosis has been made. Although endovascular intervention can be considered firstly treatment option, as in our case, the laparoscopic surgical treatment can be safe and feasible in selective patient depending on the situation.

Corresponding Author : **Jae Do YANG** (hirojawa@jbnu.ac.kr)