Liver Research Directory

Treatment for postoperative liver failure after major hepatectomy under hepatic total vascular exclusion.

Asanuma Y, Sato T, Yasui O, Kurokawa T, Koyama K.

School of Health Sciences, Faculty of Medicine, Akita University, Japan.

Hepatic total vascular exclusion (HTVE) with clamping of the portal triad and the inferior vena cava below and above the liver is a useful technique in the resection of major hepatic lesions situated close to the hepatic veins and inferior vena cava. From 1996 to 2000, five patients underwent major hepatectomy under HTVE; among these, liver failure occurred in two patients because of liver cirrhosis or hepatic artery interruption. In the former case, apheresis therapy (plasma exchange: 9 times), continuous prostaglandin E, (PGE,) infusion via the hepatic artery(0.01 tg/kg/min) for 7 days, and hyperbaric oxygen therapy (3 times: 2 ATA, 60 min) were applied. In the latter case, apheresis therapy (plasma exchange: 9 times, continuous hemodiafiltration: 12 days) and continuous PGE, infusion via the superior mesenteric artery for 7 days were applied.

With these treatment modalities, ( HBOT) both cases were cured of postoperative liver failure.

Printed with Permission

Legal Disclaimer

The content and information provided within this site is for informational and educational purposes only. Consult a doctor before pursuing any form of therapy, including Hyperbaric Oxygen Therapy. The Information provided within this site is not to be considered Medical Advice. In Full Support of the F.D.A., Hyperbaric Oxygen Therapy is considered Investigational, Experimental, or Off Label.

Please consult with your Treating Medical Physician