Honeycomb Cyst of the Liver

Sunil Taneja, Pramod Kumar, Ajay Duseja, Virendra Singh, Radha K. Dhiman, Yogesh Chawla

Department of Hepatology, Postgraduate Institute of Medical Education & Research, Chandigarh, India

A 34-year-old female presented with pain in the abdomen for 5 months. The general physical and systemic examination was normal. Ultrasound of abdomen showed two well-defined exophytic multiloculated cystic lesion of size 8.4 cm × 7 cm and 5 cm × 3.2 cm in segment 2/4 and 8 of the liver. Radial endoscopic ultrasound was done to confirm the diagnosis of hydatid cyst, which showed two anechoic multiseptated honeycomb-shaped cysts in liver with daughter cysts and hydatid sand (Figure 1). Later the serology for IgG antibody for hydatidosis came positive in 1:1600 titres. Since the cysts were large and exophytic, the patient underwent de-roofing of cyst with marsupialization surgery. The histopathological examination showed the pericyst surrounding the laminated hyaline membrane of the parasitic cyst wall. Also seen in the pericyst was the inflammatory granulation tissue margined by epithelioid histiocytes

Figure 1 Anechoic multiseptated honeycomb cyst in the liver.

Figure 2 The pericyst surrounding the laminated hyaline membrane of the parasitic cyst wall with inflammatory granulation tissue margined by epithelioid histiocytes.

suggested of hydatid cyst (Figure 2). Patient recovered well after surgery and is asymptomatic 6 months post-surgery.

The diagnosis of non-complicated hydatid cyst of the liver is based on clinical suspicion.¹ Ultrasonography and computed tomography are the most important diagnostic tools and are helpful for identifying any associated complications and for planning treatment.² Endoscopic ultrasound is an emerging new tool for the diagnosis of the hydatid cyst, which is a simple and accurate.

CONFLICTS OF INTEREST

The authors have none to declare.

Keywords: hydatid cyst, endoscopic ultrasound, ultrasound

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Address for correspondence: Assistant Professor, Department of Hepatology, PGIMER, Chandigarh, India. Tel.: +91 9592160444/172 2756344; fax: +91 1722756344.

E-mail: drsunitaneja@hotmail.com

Abbreviations: EUS: endoscopic ultrasound; CT: computed tomography; USG: ultrasonography

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