Anatomical variations of hepatic artery in adult individuals

Domingues, RJS., Miranda, RR., Corrêa, MV.,
Silva Jr., NR., Mascarenhas Jr., RW. and Rosa, FWF.

Universidade do Estado do Pará

The Amazon presents high endemicity of hepatitis C and D, which in some cases, may progress to cirrhosis, liver failure and death, and the liver transplant is one of the forms of treatment. New surgical techniques of hepatic segmentation are being developed to perform liver transplantations using part of the liver from live donors, which would reduce the waiting in queue for an organ transplant, thus reducing its mortality. With the development of bipartition technique of the liver was found that in 5% of cases, the liver transplant may not be realized due to anatomical variations, and the hepatic artery may present 25 to 40% of anatomical variations in its origin and brandch. to evaluate the anatomical disposal of the hepatic artery and its branches, as well as possible anatomical variations, in adult individuals of the State of Pará. Used twelve pieces in monoblock containing esophagus, stomach, pancreas, abdominal aorta artery, liver and its vessels, of cadavers from the Legal Medicinal Institute of Center of Skills Scientific Renato Chaves, Belém – Pará, Brazil, removed by the technique of removal of liver to orthotopic transplant, followed by dissection of the common hepatic artery since its origin to the hilum liver and cataloguing photographic. The hepatic artery was originated in celiac trunk in 91.7 and 8.3% of cases hepatosplenic trunk. The right gastric artery was directly originated from gastroduodenal artery in 8.3% of cases analyzed. The main anatomical variations of the common hepatic artery were: the presence in its origin, hepatosplenic trunk and right gastric artery as a branch of gastroduodenal artery.

Financial support: Pró-Reitoria de Pesquisa e de Pós-Graduação/Universidade do Estado do Pará.