

Septate Gallbladder Complicated By Cholecystitis: A Case Report.

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ABSTRACT :

The septate gallbladder is a rare affection with congenital or inflammatory origin. It may remain asymptomatic and be discovered incidentally by radiology, revealed by hepatic colic or complicated by cholecystitis. We report the case of a 56-year-old woman known to have a vesicular diaphragm, admitted to emergency with lithiasis cholecystitis and undergoing cholecystectomy. In this article, we discuss the clinical and ultrasound carecteristics of this pathology, while demonstrating the value of surgery before complications arise.

Key words: gallbladder, cholecystitis, cholecystectomy, diaphragm.

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I. INTRODUCTION :

Anatomical variations in the bile ducts are common in visceral surgery, but the vesicular diaphragm is a very rare anomaly. Often asymptomatic or camouflaged by a calculus, it is poorly documented [1].

In this article, we report a clinical case of gallbladder diaphragm operated on in the visceral surgery II department at the Mohamed V military hospital in Rabat.

II. Observation :

The patient was a 56-year-old woman with diabete, accuse for 2 years a right hypochondrium (RH) pain with an episode of hepatic colic. An ultrasound scan one year ago found a lithiasis of the gallbladder with an incomplete diaphragm (fig 1). Admitted to emergency with cholecystitis, the clinical examination found a positive murphy sign with right hypochondrial guarding. Biological exams found a hyperleukocytosis 18,400 and CRP 76 with no abnormal liver function tests, the ultrasound confirmed cholecystitis. The patient underwent cholecystectomy by laparotomy under the right rib (fig 2) and the histology was in favour of acute lithiasis cholecystitis.

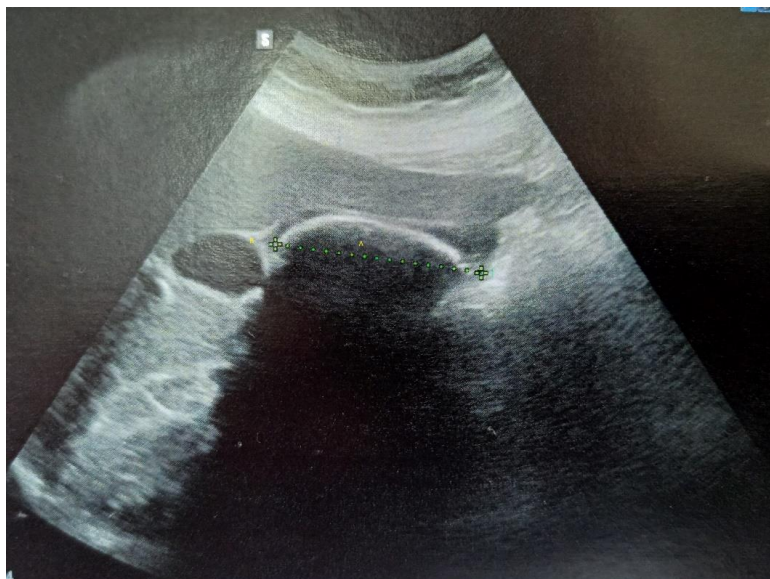


Fig 1 : ultrasound image showing :

- A. The gallbladder lithiasis
- B. The vesicular diaphragm.

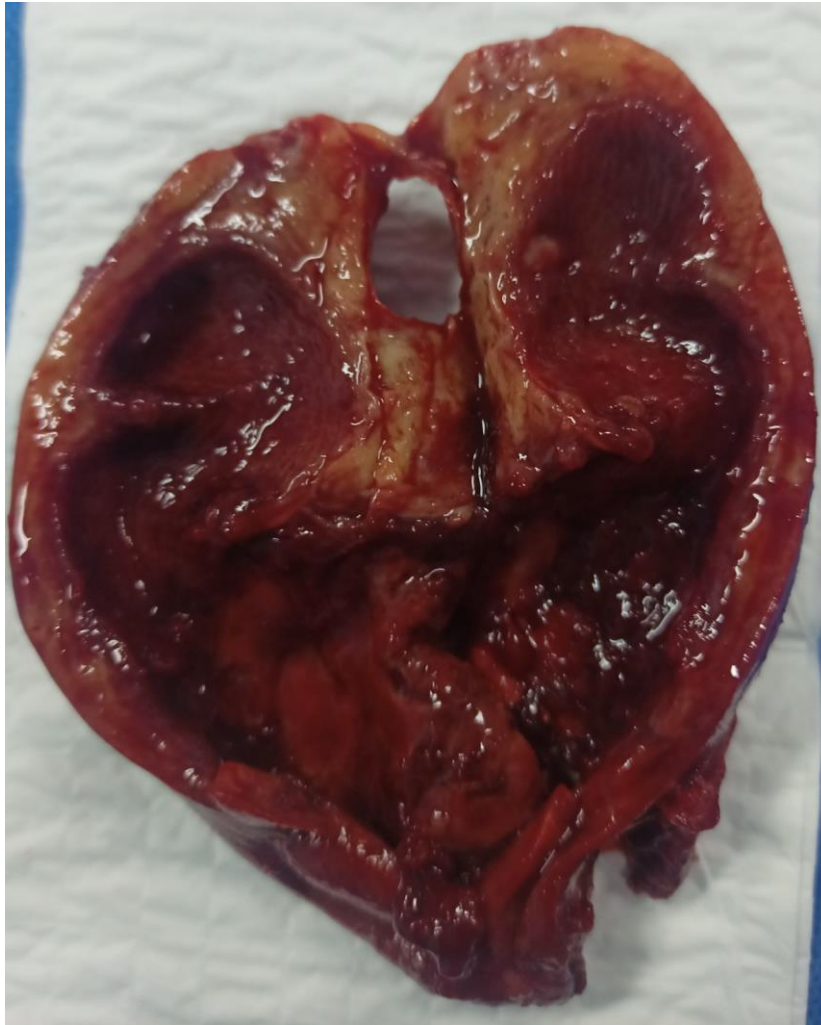


Fig 2 :Open surgical specimen showin the septate gallbladder

III. DISCUSSION:

Anomalies of the gallbladder have been classified into malformations of shape, number, site, size and heterotopias. The septate gallbladder is defined as septum that divides the gallbladder in two chambers, it is most commonly single, but multi septate gallbladder. Post inflammatory adhesions and compartmentalization of the gallbladder have also been described.[2]

The development of the gallbladder takes place from the caudal part of the hepatic diverticulum of the foregut. This caudal part is a solid structure that vacuolates after the seventh week of gestation and the alteration of this embryonic process can be the cause of anomalies of the gallbladder affecting its location, shape or number. Thus, the diaphragm of the gallbladder can be explained by an incomplete vacuolization giving an hour glass vesicle with two segments fundial and infundibular.[3]

This malformation is very rare in adults and represents 0.1% of gallbladder anomalies. It may remain asymptomatic for a long time or may be discovered incidentally or manifested by chronic liver colic or by a complication (cholecystitis or biliary peritonitis)[4]

In our case the septate gallbladder seems congenital and was diagnosed before the surgery, the cholecystitis was a complication.

IV. CONCLUSION:

The septate gallbladder is a rare manifestation which may be inflammatory or congenital in origin. Diagnosis can be made by preoperative ultrasound. Treatment is indicated for symptomatic or lithiasis forms and helps to avoid complications.

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