

value=79.74fL, SD=6.62. MCH average value=27.05pg, SD=2.63. MCHC average value 339.71g/dl, SD=12.66.

Conclusion. The majority of patients in all age categories had mild hypochromic anemia.

Both hypochromic and normochromic anemia were equally prevalent in patients between the ages of 1 and 5 years.

According to the data analysis third age group patients had mild severity hypochromic anemia with no significant alterations to the morphological characteristics of red blood cells.

ЛИТЕРАТУРА

1. Covid-19 Does Not Lead to a «Typical» Acute Respiratory Distress Syndrome / L. Gattinoni [et al.] // Am J Respir Crit Care Med. – 2020. – Vol. 201 (10). – P. 1299-1300. doi: 10.1164/rccm.202003-0817LE.

2. Anemia and iron metabolism in COVID-19: a systematic review and meta-analysis / P. E. Taneri [et al.] // Eur J Epidemiol. – 2020. – Vol. 35 (8). – P. 763-773. doi: 10.1007/s10654-020-00678-5.

TOTAL VASCULAR ISOLATION IN SEGMENTAL LIVER RESECTION FOR ECHINOCOCCAL CYST

**Dambura Hevage Tharushi Malshani,
Aparekka Gamage Lithmi Viboda**

Grodno state medical university

Научный руководитель: PhD in M Belyuk K. S.

Introduction. Echinococcal disease is widespread in many countries of the world. According to some estimates, more than 1 million people in the world are currently affected by echinococcosis, and the incidence in some endemic and non-endemic regions varies more than 200 times. In the last decade, there has been an increase in the incidence of echinococcosis and the expansion of the geographical boundaries of the disease [1].

Aim of the study. Improve the results of surgical treatment of patients with echinococcal liver cysts.

Materials and methods. The article presents the results of surgical treatment of two patients who underwent segmental resections of the liver for echinococcosis using the technique of total vascular isolation. Patients were admitted to the Department of Surgical Pancreatology, Hepatology and Transplantation of Grodno

Regional Clinical Hospital, Belarus with complaints of heaviness and aching pain in the right upper quadrant of the abdomen. Both patients underwent a complex of laboratory and instrumental research methods, including MRI, CT and ultrasound of the abdominal and retroperitoneal organs. According to MRI both patients in the S7 segment of the liver subcapsularly revealed rounded focal formations with clear contours of 50 × 33 mm and respectively 45 × 30 mm, with the presence along the posterior wall of a hyperdense component with clear contours of 5 * 6 mm. The fact of the intimate location of liquid formations to the right hepatic vein in both cases has been established.

Patients underwent segmental resection of the liver for an echinococcal cyst using the method of total vascular isolation. In both cases, a laparotomy was performed with a J-shaped approach in the right upper quadrant of the abdomen. To carry out total vascular isolation of the liver, the inferior vena cava in the supra- and subhepatic sections, as well as the hepatoduodenal ligament were mobilized using a thread-Pringle maneuver. During the mobilization of one of the veins, one patient was found to have a linear traction defect in the wall of the inferior vena cava. Thanks to the use of total vascular isolation, intraoperative blood loss was avoided at this stage. The place of "linear traction " was stitched with a vascular suture over the vascular clamp of Satinsky. Liver parenchyma transsection was performed using ligasure triad apparatus, bipolar and monopolar coagulation, as well as using precision stitching of visualized vascular and biliary structures. Resections of the 7th segment of the liver with the above-described formations were performed step by step.

Results and discussion. The duration of the operation in both cases was about 6 hours. Intraoperative blood loss averaged about 400 ml. Both patients were discharged from the surgical hospital in a satisfactory condition for 10 and 15 days respectively in the postoperative period. During the pathohistological examination of macropreparation, the diagnosis of echinococcal cyst was confirmed in both cases. There were no relapses of the disease, as well as repeated admissions to the hospital with a follow-up period of up to 1.5 years.

Conclusion. The use of the method of total vascular isolation allows to significantly reduce intraoperative blood loss, and also makes it possible to avoid extensive resections in echinococcal liver cysts.

ЛИТЕРАТУРА

1. Vishnevsky VA, Ikramov RZ, Kakharov MA, Efanov MG Radical treatment of liver echinococcosis. Current state of the problem // Bulletin of Siberian Medicine. 2007.