XVIII. Diseases of Liver, G. Bladder, Pancreas & Peritoneum

Liver

Hydatid Cyst III- 6. 4631

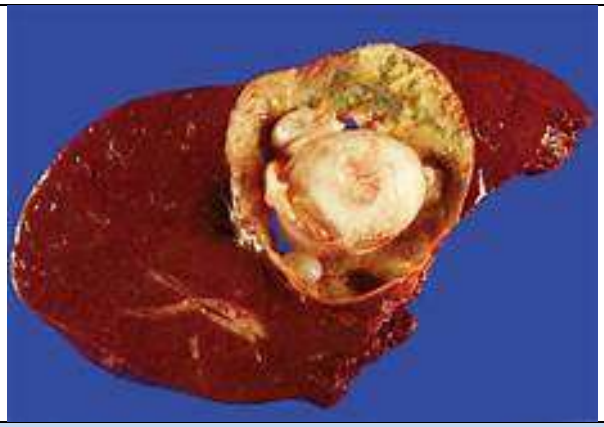
Liver:	Shows a cyst (hydatid)				
	The cyst:	• Moderate in size • Multilocular • With daughter hydatid cysts • Shows calcified walls • Areas of calcification in its centre • Areas are opaque yellowish-white			

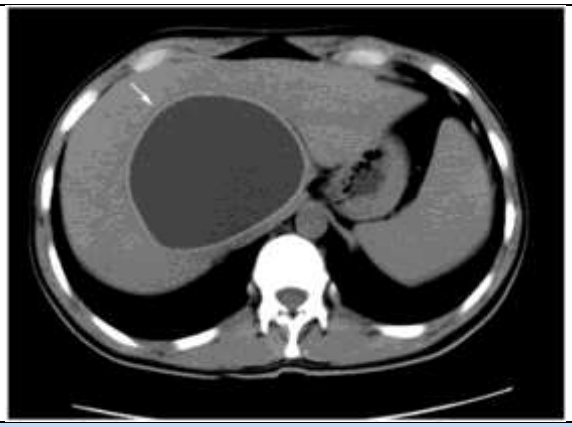
N.B.:

- This is the Cysticercus stage of Taenia Ecchinococcus.
- The commonest site in the liver is the right lobe →enlargement of liver.
- When the embryo reaches the liver, an ***adventitial fibrocicatricial capsule is formed*** by conversion of the immediate neighbouring structures.

The true hydatid mother-cyst consists of two layers:		
1. Ectocyst:	***Of fibrous tissue.***	• Is calcified after death or necrosis. • Appears as concentric hyaline laminae.
2. Endocyst:	***From its germinal cells arise:***	• Taenia heads (scolices). • Secondary or daughter cysts.

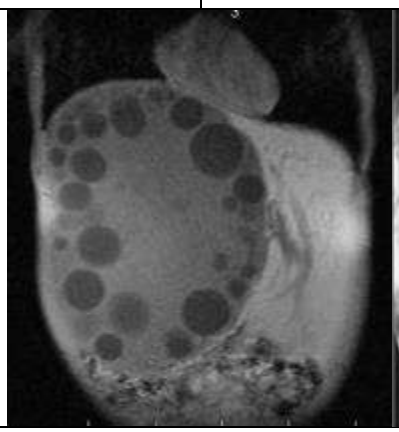
- Spontaneous death of the parasite (or its degeneration), changes the cyst into a yellowish-grey putty-like material.
- The cyst shrivels →contents become inspissated → capsule becomes calcified.
- The contents of hydatid cyst should never be aspirated; and,
- They contain a clear fluid (of specific gravity 1.008) which contains chlorides;
- (Daughter cysts with scolices or hooklets may be present; or, if the cysts are sterile they may be absent).

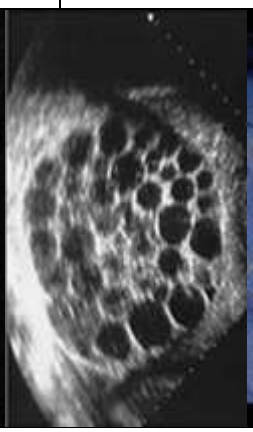




Hydatid Cysts and Daughter Cysts

Hydatid cysts:	• **Numerous** • **With daughter cysts**	
	Daughter cysts:	• **Numerous** • **Moderate in size** • **Rounded in shape** • **Semi-translucent** • **Separated from each other**



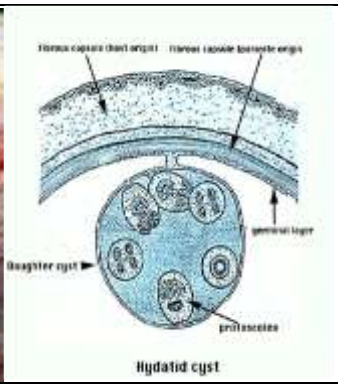


N.B.:

Complications:

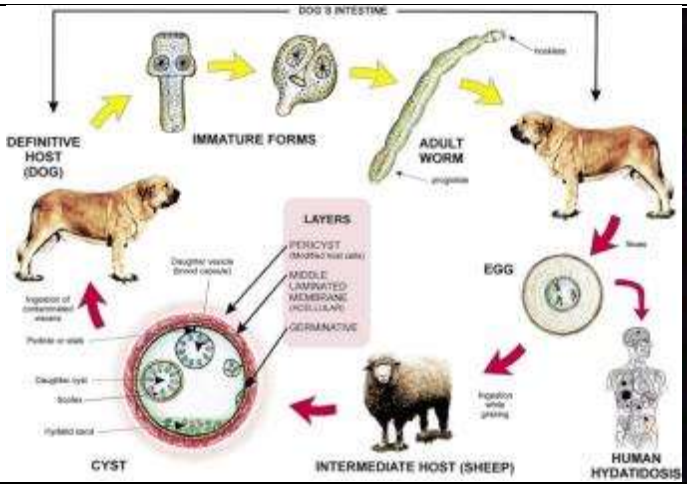
Hydatid disease is due to infection with the Ecchinococcus granulosus.

1. ***Suppuration from secondary bacterial infection →formation of a pyogenic abscess.***
2. ***Rupture into:***
   (a) Peritoneal cavity → peritoneal cyst or ascites and subsequent peritonitis.
   (b) Biliary system → obstructive jaundice.
   (c) Intestine → parasites in stools.
   (d) Pleural cavity → pleural cyst.
   (e) Chest → pulmonary cyst.
   (f) Blood stream →secondary cysts.
   (g) Skin →fistula formation.
3. ***Hydatid shock or collapse from rupture of cyst.***



Diagnostic methods:

1. Complement fixation test.
2. **Casoni's** intradermal test.
3. Eosinophilia (blood).
4. X-ray picture → a cyst with a definite outline,
5. Physical signs (fluctuation, elasticity, thrill and absence of pain) + enlarged liver in a rather healthy person.



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