



Laparoscopic partial splenectomy for a splenic pseudocyst.

[Corcione F](#), [Cuccurullo D](#), [Caiazzo P](#), [Settembre A](#), [Bruzzese G](#), [Vittoria I](#), [Cusano T](#).

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We describe a laparoscopic hemisplenectomy that was performed to treat a 21-year-old patient with a large splenic pseudocyst located in the upper splenic pole. The diagnosis was made by computed tomography and ultrasound, and surgery was performed with ultrasound scalpel, clips, and fibrin glue. Surgery lasted 70 min and did not require blood transfusions. The patient was discharged on postoperative day 3, and at 28-month follow-up there were no sequelae or recurrences. The laparoscopic approach is a valid alternative to laparotomy because the integrated magnified view enables the surgical team to perform surgery in a much shorter time and with greater hemostatic accuracy than the traditional technique.