

SUMMARY

Intra - hepatic cysts are diseases of the liver and intra hepatic biliary tree include entities which differ in aetiology , manifestations and management .

Intra hepatic cysts are either congenital or acquired . Congenital cysts include; parenchymal and ductal cysts . Parenchymal cysts include ; solitary cysts , polycystic disease of the liver and congenital hepatic fibrosis .

Ductal cysts include : solitary ductal cyst and multiple cystic dilatations of intrahepatic bile ducts (caroli's syndrome) .

Acquired cysts include : echinococcal cysts , neoplastic cysts (benign and malignant) and post traumatic cysts .

The great majority of patients of hepatic cysts are asymptomatic . Most of cases are incidental finding at operation or autopsy . When symptoms occur , they are usually related to the presence of enlarging mass in the upper abdomen , the most common presentations include ; abdominal mass , hepatomegaly , abdominal pain and jaundice . Complications are rare , may account for symptoms . They include : perforation ,

haemorrhage , secondary infection , torsion of cyst on a pedicle and spontaneous rupture .

Ultrasonographic and computed tomographic scannings are the most accurate procedures for diagnosing hepatic cysts .

Other procedures may be needed to confirm the diagnosis as : cholangiography and arteriography .

The treatment of hepatic cysts varies according to their nature and many other factors . The non surgical lines of therapy plays a minor role as an adjuvant lines of therapy for surgery which is the mainstem in planing of the treatment strategy . Laparoscopy is taking a promising steps in this field , carrying the hope to decrease the dependence on open surgery in the near future .