Introduction

The Spleen is an important lymphatic organ in the body. It lies in the left hypochondrium between the gastric fundus and the left hemidiaphragm ***(Richard et al., 1995).***

It plays an important role in defense against any organisms that penetrate the circulation. It is responsible for formation of activated lymphocytes which pass into the blood. It is a site for destruction and removal of effete and damaged red cells and represents an important immunologic blood filter and antibody – forming organ, so It should not lightly be removed. ***(Peter et al., 1994).***

Splenectomy has been practiced since the early days of twentieth century for cases of Egyptian hepato-splenomegaly, but now splenectomy is a common operative procedure for patients with malignant and non malignant haematologic disorders ***(Wobbes et al; 1984).***

The indications for splenectomy may be diagnostic as in hodgkin's disease, or curative as in idiopathic thrombocytopenic purpura; in addition, it may be performed to facilitate chemotherapy or alleviate hypersplenism ***(Cooper et al; 1984).***

It is curative in ITP as in this patients there is platelet destruction which is associated with the presence of an antibody (immunoglobulin) probably synthesized by the spleen ***(Millan et al; 1972).***

In thalassemia, you can reduce the need for blood transfusion by splenectomy. If the patient's need more than 1.5 times than normal, this is an evidence of hyperplenism that indicates splenectomy ***(Cao et al; 1987)***.

Hypersplenism is a clinical syndrome with many causes which characterized by splenic endargement, hematological cytopenia (reduction in one or more cellular components of the blood); maturation arrest in the marrow, and the premature release of immature cells into the circulation. This syndrome is treated by splenectomy ***(Clark et al; 1994).***

Splenectomy can be performed either by open splenectomy or laparoscopic splenectomy ***(Williamson et al; 2000).***

During the last several years; laparoscopic splenectomy has been gaining acceptance as an altenative to open splenectomy especially in the majority of heamatological conditions ***(Nixon et al; 2000).***

Complications rates for patients undergoing splenectomy are related to operative procedure; the experience of the surgeon and indication for splencetomy; haemorrhage, post splenectomy sepsis…..etc ***(Cooper et al; 1984).***