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## Laparoscopic Surgery Of Incidental Gallbladder Cancer After Cholecystectomy For Acute Cholecystitis

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**Background** : A small proportion of gallbladder carcinoma (GBC) is incidentally found after laparoscopic cholecystectomy (LC) and Extended resection with regional lymph node dissection is recommended as most patients have residual disease in the liver or the lymph node. Recently, many centers have reported that laparoscopic approach for postoperatively diagnosed GBC could be feasible, with satisfactory clinical outcomes including oncologic results. However, laparoscopic approach seems to be technically challenging for incidental GBC after LC with acute cholecystitis because of inflammatory adhesions or fibrosis around the hepatoduodenal ligament and GB bed. Herein, we present laparoscopic liver resection with regional lymphadenectomy in patients with an incidental GBC after LC with acute cholecystitis.

**Methods** : From June 2018 to Dec 2020, four patients received laparoscopic reoperation for postoperatively diagnosed GBC.

**Results** : One patient had T1b GBC and others had T2 GBC. Median operative time was 249 (183-270) min and Estimate blood loss was 225(200-300) ml. Postoperative stay was 10 days (7-14). There is no major complications after operation (Clevien-dindo III or above). There was no open conversion during operation in all patients.

**Conclusions** : Laparoscopic approach could be a feasible option for incidental GBC after LC with acute cholecystitis without significantly adverse postoperative outcomes in spite of technical complexity.

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