

LETTER

Dear Editor,

We read with great interest the paper "The postoperative appearances of the liver on ultrasonography following hydatid cyst surgery" by Dr. Ilter and Dr. Mentec which appeared in *HPB Surgery* 1990; 2: 253–260.

Although we are in agreement with the authors on most points, several points must be stressed.

In the postoperative follow-up of patients after hydatid cyst surgery, the major problem is not the differentiation of the lesion from malignant lesions as no association exists between hydatid cysts and malignant tumors. But the real problem is to differentiate the normal postoperative image on ultrasonography from recurrences. Recurrences, which must be expected in 10% of cases, and undetected small cysts pose a great diagnostic problem. Hemagglutination test may be helpful but there are false positive and false negative results and furthermore they are not helpful in the postoperative period while seropositivity may continue for up to six years.

We followed 24 patients after hydatid cyst surgery with both ultrasonography (US) and computed tomography (CT). In a mean follow-up of 20 months (range 6–72 months), there were four recurrences (1). In one of these US revealed no pathology and in the remaining three CT was required to confirm the diagnosis.

We conclude that, while US is widely available and easy to use, the postoperative follow-up of patients after hydatid cyst surgery may be misleading as normal images may be regarded as recurrences and vice versa. CT is far more reliable in demonstrating recurrences and the late course of the cystic cavity after surgery. Sincerely yours.

1. Yalin, R., Aktan, A. O. Acikgozoglul, S. Computed tomography and sonography of hydrated cysts of the liver after surgical management. *Journal of Medical Imaging* 1989; 3: 301–305.

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