

Case Blog

Title: An Unusual Right Upper Quadrant Pain Cause: Multiseptate Gallbladder

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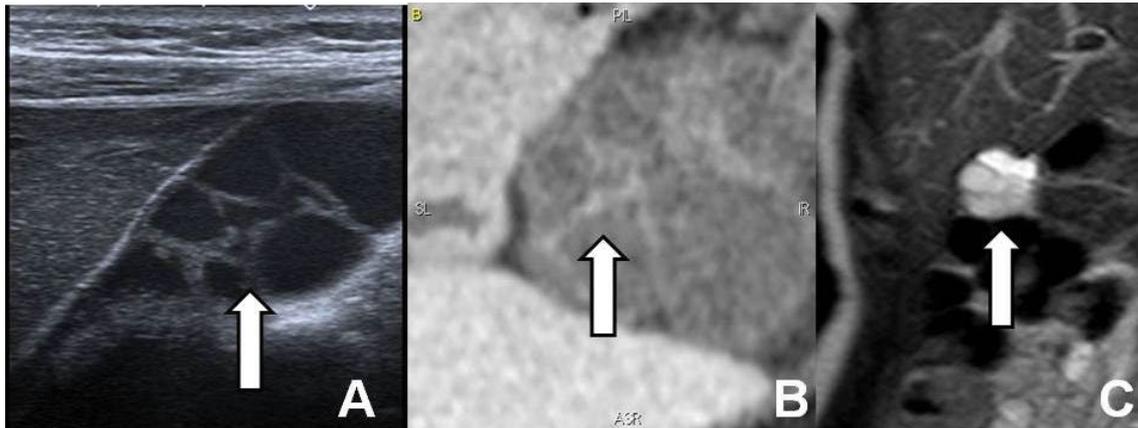


Figure A: Transabdominal sonography showed complete and incomplete longitudinal and transverse septas in the gallbladder body.
Figures B and C: Contrast-enhanced computed tomography and magnetic resonance cholangiopancreatography (MRCP) revealed multiple septas giving a honeycomb appearance.

Clinical Presentation

A 29-year-old woman presented to the emergency department with right upper quadrant pain, nausea. Laboratory tests indicated a mildly increase in transaminases and total bilirubin. On physical examination, Murphy's sign was positive. Transabdominal sonography showed complete and incomplete longitudinal and transverse septas in the gallbladder body (Figure A). Contrast-enhanced computed tomography and magnetic resonance cholangiopancreatography (MRCP) revealed multiple septas giving a honeycomb appearance (Figures B and C). The patient received a diagnosis of multiseptate gallbladder. The patient underwent laparoscopic surgical excision of gall bladder. A radiological diagnosis of multiseptate gall bladder was confirmed on pathology. Gross pathology gallbladder material showed chronic cholecystitis with multiple septas.

Multiseptate gallbladder is a rare congenital malformation of gallbladder that characterised by the presence of bridging multiple septas like honeycomb [1]. Multiple septas may cause stasis of bile and effect motility [1,2]. As a result of this, cholecystitis and cholelithiasis may occur. Multiseptate gallbladder are also related with hepatobiliary and pancreatic ductal anomalies and increased risk of cancer [3]. Ultrasound is an important diagnostic tool for multiseptate gall bladder, on the other hand MRCP and other imaging modalities can be used for diagnosis [4]. It is crucial to follow up and investigate cases with multiseptate gallbladder. Symptomatic cases can be treated with cholecystectomy.

References

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