

Spinal Hydatid Cyst Disease: Challenging Surgery—an Institutional Experience

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Introduction

Hydatid cyst disease is caused by the parasite *Echinococcus granulosus*. It is rarely seen in the vertebral system, occurring at a rate of 0.2%–1%.

Methods

12 cases of spinal hydatid cysts, multiple operations, chronic recurrences, and spinal hydatid cyst excision methods are discussed in the context of the literature. In all cases, surgery was performed, with the aim of total excision of the cyst, decompression of the spinal cord, and if necessary, stabilization of the spinal column.

Results

Although a spinal hydatid cyst is a benign pathology and seen rarely, it is extremely difficult to achieve a real cure for patients with this disease.

Conclusions

Treatment modalities should be aggressive and include total excision of the cyst without rupture, decompression, flushing of the area with scolical

Properties of patients with spinal hydatid cyst disease

Patient No	Age	Gender	Neurological deficit	Localization	Systemic infection	Extradural space and Paravertebral area involvement	Operated (times)	Follow-up (months)
1	50	M	-	Sacral	+	-	3	66
2	14	F	-	Thoracic	-	-	1	16
3	54	M	-	Distal	-	-	3	70
4	45	F	-	Thoracic	-	-	6	138
5	38	F	-	Lumbar	-	-	3	66
6	42	M	-	Cervical	-	-	2	55
7	58	M	-	Thoracic	-	-	4	154
8	32	M	-	Lumbar	-	-	1	32
9	32	F	-	Sacral	-	-	1	20
10	9	F	-	Thoracic	-	-	2	36
11	45	F	-	Sacral	-	-	11	359
12	44	M	-	Thoracic	-	-	2	46

Properties of patients with spinal hydatid cyst disease (age, gender, follow-up, neurological deficit, cyst localization, extradural space and paravertebral area involvement)

Spinal hydatid cyst cavity drainage and irrigation



Placing this unique drainage enables continuous drainage and irrigation of the spinal hydatid cyst cavity

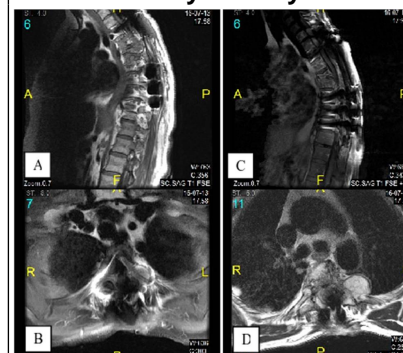
Learning Objectives

1) Spinal hydatid cyst disease treatment should be aggressive and include total excision of the cyst without rupture, decompression, flushing of the area with scolical drugs, and ensuring spinal stabilization.

2)The surgeon dealing with spinal hydatid cyst infection should remember to administer albendazole treatment before surgery.

3)Secondary wound infection is the most common morbidity after surgery. Postoperative antibiotics and wound care should be applied with utmost care.

recurrent hydatid cyst MRI



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