Introduction: Improvement of the results of surgical treatment of patients with liver echinococcosis, complicated by obstructive jaundice.

Method: A survey and treatment of 366 patients with liver echinococcosis, operated for the period from 2007 to 2017. Echinococcosis of the liver, complicated by obstructive jaundice, was detected in 73 (19.9%) patients. The age of the patients varied from 16 to 76 years. There were 154 men (42.1%), women - 212 (57.9%). When choosing a diagnostic algorithm, preference was given to both endoscopic and instrumental methods.

Result: Depending on the severity of the clinical picture, we divided the patients into three groups. The first group included 37 (50.7%) patients with severe (icteric) form of the disease. The second group included 22 (30.1%) patients who had an erased clinical picture due to the formation of a cystobiliary fistula with segmental bile ducts. In 14 patients, the third group (19.2%) had a mild clinical course of the disease. Endoscopic papillosphincterotomy (EPST) was performed in 21 patients, including the instrumental removal of fragments of the chitinous membrane, the daughter cysts of echinococcus (13).

![Fig.1. Video endoscopy. Stages of the emergence of the chitinous membrane from the large duodenal papilla](image1)

Combined EPST and nasobiliary drainage was applied to 7 patients. Indications for combined performance of these manipulations were: a significant picture of parasitic cholangitis (4) and edema of the large duodenal nipple (3).

In 44 (60.3%) patients who for various reasons failed to eliminate biliary hypertension endoscopically, after appropriate preoperative preparation, traditional interventions performed in a delayed manner.

![Fig.2. Breakthrough of the echinococcal cyst into holedoch. Stages of dissection and removal of chitinous shell from choledoch](image2)

After the implementation of the above operative interventions (73), there were three deaths (4.1%). Postoperative complications were revealed in 6 (8.2%) patients.

Conclusion: With obstructive jaundice of echinococcal genesis, it is advisable to conduct stage treatment. At the first stage of endoscopic intervention, and the second stage and with the impossibility of endoscopic interventions, traditional surgical interventions should be used.