# **Bassem Soliman Hegab**



Faculty:	National Liver Institute
Research title:	
Arabic:	الإصلاح المبكر والفوري لإصابات القناة الصفراوية لمرحلة ما بعد استئصال المرارة بالمنظار عن طريق المتخصصين و ارتباطها بتحسن النتائج على الم
English:	Specialist early and immediate repair of post-laparoscopic cholecystectomy bile duct injuries is associated with an improved long-term outcome.
Principal investigator	M. Thamara P. R. Perera, Michael A. Silva , Bassem Hegab, Vijayaragavan Muralidharan, Simon R. Bramhall , A. David Mayer, John A. C. Buckels, and Darius F. Mirza
investigators- co:	
publication	
Date of department approval:	0 - 0 - 0
Abstract	Introduction: A majority of bile duct injuries (BDI) sustained during laparoscopic cholecystectomy require formal surgical reconstruction, and traditionally this repair is performed late. We aimed to assess long-term outcomes after repair, focusing on our preferred early approach. Methods: A total of 200 BDI patients [age 54(20–83); 64 male], followed up for median 60 (5–212) months were assessed for morbidity. Factors contributing to this were analyzed with a univariate and multivariat

Faculty: National Liver Institute

Research title:

الستبعاد متبرعي زراعة الكبد في عمليات زراعة الكبد من متبرع حي يوم اجراء Arabic:

الجراحة

English: Day-of-surgery rejection of donors in living donor liver

transplantation

Principal investigator

Bassem Hegab

**investigators-co:** Mohamed Rabei Abdelfattah, Ayman Azzam, Hazem

Mohamed, Waleed Al Hamoudi,

Faisal Aba Alkhail, Hamad Al Bahili, ,

Hatem Khalaf, Mohammed Al Sofayan

Mohammed Al Sebayel

publication

Date of department approval:

0 - 0 - 0

Abstract

AIM: To study diagnostic laparoscopy as a tool for excluding donors on the day of surgery in living donor liver transplantation (LDLT). METHODS: This study analyzed prospectively collected data from all potential donors for LDLT. All of the donors were subjected to a three-step donor evaluation protocol at our institution. Step one consisted of a clinical and social evaluation, including a liver profile, hepatitis markers, a renal profile, a complete blood count, and an abdominal ultras

Faculty: National Liver Institute

Research title:

الأورام الخبيثة المستحدثة بعد عملية زراعة الكبد: خبرة مركز واحد

English: De novo malignancies after liver transplantation: a single center

experience

Principal investigator

Bassem Hegab

investigators-co: Hatem Khalaf, Naglaa Allam, Ayman Azzam, Faisal Aba Al

Khail, Waleed

Yasser Kamel, ,

Hamad Al Bahili, Mohammed Al Sofayan

Mohammed Al-Sebayel

publication

Date of department approval:

Abstract

0 - 0 - 0

BACKGROUND AND OBJECTIVES: The recipients of liver

transplantation (LT) are subjected to lifelong

immunosuppression with its many drawbacks. De novo and recurrent malignancy in transplant recipients are attributed to

attenuation of immunosurveillance. In the present study, we present our experience with de novo malignancies encountered

after both deceased and living donor liver transplantations.

# DESIGN AND SETTING: Retrospective study of patients referred to LT center between April 2001 and

# **(4)**

Faculty: National Liver Institute

Research title:

العلاج الجراحي لمضاعفات القنوات المرارية بعد عمليات زراعة الكبد من متبرع

حی

English: Surgical management of biliary complications following living

donor liver transplantation.

Principal investigator

Hatem Khalaf

investigators-co: Khalil Alawi, HamadAlsuhaibani,

Bassem Hegab

Yasser Kamel, Ayman Azzam,

Hamad Albahili, Mohammad AlSofayan and Mohammad

AlSebayel

publication

Date of department approval:

0 - 0 - 0

Abstract: Background: Biliary complications (BC) account for

much of the morbidities seen after living donor liver transplantation (LDLT). Surgical reconstruction might be necessary after the failure of endoscopic or percutaneous

**Abstract** 

procedures. Methods: Between November 2002 and December 2009, a total of 76 LDLTs were performed. Six patients were excluded from statistical analysis because of early graft or patient loss. Results: Of 70, 26 (37.1%) developed BC; 12 (46.2%) were successfully m

**(5)** 

National Liver Institute **Faculty:** 

Research title:

انتشار خلايا سرطان الكبد في مسار الخزعة بعد عينة الكبد المستخدمة في تشخيص Arabic:

سرطان الكبد استعراض منهجي وتحليل ميتا

Needle track seeding following biopsy of liver lesions in the **English:** 

diagnosis of hepatocellular cancer; a systematic review and

meta-analysis

**Principal** investigator

M A Silva

investigators-co: B Hegab

C Hyde, B Guo

J A C Buckels

D F Mirza

publication

Date of department approval:

0 - 0 - 0

Abstract

Background: Needle biopsy of a suspicious liver lesion could guide management in the setting of equivocal imaging and serology, although it is not recommended generally because

there is the possibility of tumour dissemination outside the liver. The incidence of needle track seeding following biopsy of a suspicious liver lesion is ill-defined, however. Methods: A systematic review and meta-analysis of observational studies published before March 2007 was performed. Studies that reported

(6)

Faculty: National Liver Institute

Research title:

تمدد وتضيق القناة الصفر اوية بعد الزراعة المركبة للكبد و الأمعاء الدقيقة في Arabic:

الأطفال: تعريف حديث للمضاعفات المعترف به

Biliary dilatation and strictures after composite liver-small bowel transplantation in children: defining a newly recognized

complication

Principal That investigator

Thamara PR Perera,

**investigators-co:** Girish L. Gupte, Khalid Sharif, Bassem Hegab, Cristina doPazo,

Simon P. Olliff,

Deirdre A. Kelly, Paolo Muiesan,

A. David Mayer

Darius F. Mirza

publication

Date of department approval:

Background. Biliary dilatation and strictures (BDS) are well recognized after liver transplantation but not reported after composite liver–small bowel transplantation (CLSBT). We aimed to describe and propose a classification of BDS in children undergoing CLSBT and analyze the potential risk factors. Methods. Biliary complications of 47 consecutive children undergoing CLSBT were reviewed and classified according to presentation, location, and intervention required. The following variables

**(7)** 

Faculty: National Liver Institute

Research title:

زراعة الكبد في مرضى أمراض الكبد الخبيثه: خبرة مركز واحد Arabic:

**English:** Liver transplantation in patients with hepatocellular carcinoma:

a single center experience

Principal investigator

Ayman Zaki Azzam, Bassem Hegab,

investigators-co: Hatem Khalaf, Hamad Al Bahili,

Hazem Mohammed, Yasser Kamel, Faisal Abal Khail, Waleed

Al-hamoudi,

Mohammad Al Sofayan,

Mohammed Al Sebayel

#### publication

Date of department approval:

Objectives: Liver transplantation has become one of the best treatment options for early hepatocellular carcinoma in cirrhosis. We sought to study the results of liver transplantation in patients with hepatocellular carcinoma and to evaluate the outcome of the patients. Materials and Methods: The medical records of 256 recipients who underwent a liver transplantation from April 2001 to January 2010 were reviewed. One hundred seventy-six patients received their livers from deceased dono

(8)

Research title:

Arabic: عمل مع الشريان الكبدي الإيمن الملحق أو المستبدال خلال عملية حصاد الاعضاء: نتائج در اسية للتصوير الوعائي

The management of an accessory or replaced right hepatic artery during multiorgan retrieval: results of angiographic study

Principal investigator

P. Thomas Cherian, Bassem Hegab

Simon P. Oliff

Stephen J. Wigmore

## publication

Date of department approval:

In the presence of anatomical variants such as an accessory or replaced (A/R) right hepatic artery (RHA), a conflict of interest can arise during organ retrieval between liver and pancreatic teams. This angiographic study examines the anatomy of the inferior pancreaticoduodenal artery (IPDA), its relation to the A/R RHA, and the implications for the use of livers and pancreases from multiorgan donors. Gastrointestinal angiograms performed in our institution for unrelated indications were rev

(9)

National Liver Institute **Faculty:** Research title: إصابات القناة المرارية الخلفية القطاعية اليمني بعد عملية استئصال المرارة **Arabic:** بالمنظار: إنتظار أم جراحة؟ Right posterior sectoral bile duct injuries post laparoscopic **English:** cholecystectomy: Wait or Operate? **Principal** Bassem Hegab investigator Sherif Saleh, Samy Kashkoush investigators-co: Hany Abdulmageed Osama Hegazy Tarek Ibrahim

#### publication

Date of department approval:

Background/Aims: Right posterior sectoral hepatic duct (RPSD) variations are seen in about 6%-8% of population. Our aim was to study the management of RPSD injuries during laparoscopic cholecystectomy (LC) in a specialized center. Methodology: Ten cases with RPSD injuries were treated between 2005 and 2010 and were followed-up for a median of 20 months (range, 12-60 months). Demographic data, clinical presentation, management and outcome were reviewed. Results: Four patients (4/10, 40%) unde