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DISCUSSION

DR. GEORGE D. LILLY (Miami): I certainly hesitate to comment on Dr. Warren's paper with his vast experience, but Dr. John Turner of Miami brought back a prophylactic modality which was new to me. He attributed it to Dr. West of New York.

Rather than trying to control a rampaging cystic artery by a finger in the foramen, he enters the lesser sac from the lower border of the stomach and has his assistant control the bleeding by digital compression of the celiac axis, leaving the surgeon free to carefully locate the bleeding point in a dry field.

I have seen this employed twice where the residents got in trouble and I do believe it is a valuable prophylactic thing in controlling hemorrhage, which I believe is responsible for a major part of these common duct injuries.

DR. WILLIAM M. McDONALD (Boston): A previously unrecognized feature of this injury brought to light by the recent survey of patients who presented at the Lahey Clinic with extrahepatic duct strictures was the frequent involve-

ment of the common hepatic duct as the primary site of injury. We had suspected this from clinical observation.

This frequent involvement of the common hepatic duct indicates that *tenting* of the duct may not be as frequent an etiologic cause now as was previously taught, although this still undoubtedly occurs in too large a percentage of patients.

The injury to the common hepatic duct might theoretically arise either at the time of mobilization of a firmly apposed cystic duct or when control of bleeding from the cystic artery is managed in such a way as to damage the duct.

Therefore, it seems necessary that teaching of the technic of cholecystectomy must emphasize the correct surgical management of the cystic duct, the cystic artery, and the control of bleeding as well as the prevention of *tenting* of the common bile duct and common hepatic duct by excessive traction.

DR. KENNETH W. WARREN (closing): I would like to thank Dr. Lilly for the suggestion he has made. I think it has merit and I can assure him that within a very short time we will probably use it.