

The invention relates to medicine, in particular to surgical hepatology and can be used for reactivation of lymphatic circulation in the thoracic lymphatic duct in order to correct ascitic syndrome in patients with decompensated liver cirrhosis.

Summary of the invention consists in that under local anesthesia with 1% lidocaine solution is made a transverse incision of 4...5 cm in the left supraclavicular region, are dissected layer by layer the soft tissues and cervical fascia between the legs of the sternocleidomastoid muscle, is mobilized the internal jugular vein with the left venous angle, is determined the localization of the main trunk of the thoracic lymphatic duct and lympho-venous confluence, then is widely mobilized the lymphatic duct along the entire cervical segment from the confluence to the posterior mediastinum with excision of adhesions and the package of prescalene lymph nodes, are mobilized the afferent lymphatic branches, is prepared one of the branches having the largest diameter, the remaining branches are ligated, through the prepared branch is introduced a catheter with a diameter of 1...3 mm into the lumen of the cervical arch on a portion of 3...7 cm, then is temporarily tightened with a clamp the terminal portion of the thoracic lymphatic duct and with the help of a syringe is retrogradely injected under pressure a mixture of 0.9. % NaCl solution, in an amount of 20...40 ml and 10% lidocaine solution, in an amount of 2 ml, until the drainage function is restored during breathing, then after the restoration of lymphocirculation through the lymphatic thoracic duct, with the same ligatures are fixed to the adjacent cervical fascia with the suspension of the duct in the created space in a stable optimally functional position, it is performed the necessary hemo- and lymphostasis, are sutured the layers of the postoperative wound placed above the sternocleidomastoid muscle and is applied an aseptic bandage.

Claims: 1