

## Comparison Of Laparoscopic And Open PPPD As Beginner

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**Background** : Laparoscopic pylorus preserving pancreatoduodenectomy (PPPD) is one of the high-level surgeries that requires long time, complicated and difficult techniques. As a hepatobiliary surgeon who starts Laparoscopic PPPD, it is difficult to do laparoscopically because we have less chance or experience of PPPD. This study reviewed eight cases of laparoscopic PPPD and compared with open PPPD.

**Methods** : We reviewed age, gender, diagnosis, BMI, operation time, estimated blood loss during surgery, and postoperative pancreatic fistula (POPF) of patients who underwent PD or PPPD retrospectively between March 2017 to December 2021.

**Results** : There were a total of 28 patients who performed PPPD or PD, of which in 24 cases, except for 4 cases of combined organ or vessel resection. There were no differences in age, body mass index, diagnosis, blood loss, POPF and hospital days between the two groups. However, the surgical time was significantly longer in laparoscopic group. When analyzing eight laparoscopic cases, patients 1 and 2 performed a duct to mucosa (Cattel-Warren technique) anastomosis through upper midline mini-laparotomy. But, grade 2 POPF had happened in patient 2. So we changed to Blumgart style in patients 3~8. The amount of blood loss and the operation time showed improvement over time, but it still took considerable time.

**Conclusions** : Laparoscopic PPPD is still considered technically demanding operation. The procedure required a long operation time during the initial experience. However, we have performed laparoscopic PPPD safely despite of concerns about potential risk and complications. Further studies to evaluate long term favorable outcomes and efforts to shortening the time are required.

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