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The Effects Of Sarcopenic-obesity On Complications After Pancreatoduodenectomy

Ji Su KIM¹, Sung Hyun KIM*¹

¹Department Of Hepatobiliary And Pancreatic Surgery, Yonsei University College Of Medicine, REPUBLIC OF KOREA

Background: Malnutrition is well known as influences surgical outcome in cancer patients. Body composition reflects a patient's nutritional status. This study aims to determine the association between the body composition calculated from preoperative computed tomography (CT) images and postoperative complications after pancreatoduodenectomy (PD).

Methods: From January 2005 to December 2019, the medical records of patients who underwent PD for periampullary cancer were retrospectively reviewed. Skeletal muscle index (SMI) and visceral fat area (VFA) were calculated from preoperative CT images. Low SMI and high VFA were respectively termed "sarcopenia" and "obesity".

Results: A total 630 patients were reviewed. A total 293 patients were analyzed excluded the obesity only group and sarcopenia only group. The normal group (N=176) and sarcopenic-obesity group (N=117) were analyzed retrospectively. The sarcopenic-obesity group has more clinical relevant postoperative pancreatic fistula (CR POPF) than normal group [11(6.3%) vs 23(19.7%), p \langle 0.001]. The sarcopenic-obesity group has more major complication than normal group [20(11.4%) vs 27(23.1%), p=0.007].

Conclusions: The sarcopenic-obesity is related with the incidence of major complication and CR POPF after PD for periampullary cancer.

Corresponding Author: Sung Hyun KIM (OHLIEBE@yuhs.ac)