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Pure Laparoscopic Pancreaticoduodenectomy With Radical Cholecystectomy For Gallbladder Cancer

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Background: Hepatopancreatoduodenectomy (HPD) is an aggressive surgery for treatment of gallbladder cancer, because of high risk of perioperative morbidity and mortality. Furthermore, pure laparoscopic HPD is an extremely complex procedure. Laparoscopic HPD in gallbladder cancer has recently been reported in only one case worldwide. We will present a case who received a laparoscopic HPD

Methods: A 66 year old male was transferred for treatment of mass forming lesion in pancreas head. During pre-operative further evaluation, gallbladder wall thickening was also identified. Gallbladder cancer with invasion into peri muscular connective tissue was confirmed by intra-operative frozen biopsy. PPPD with extensive regional lymph node dissection and radical cholecystectomy including partial hepatectomy of segment V and IVb was performed by totally laparoscopic approach. And, portal vein at the confluence of superior mesenteric vein and splenic vein was segmentally excised and reconstructed by end-to-end anastomosis due to the risk of cancer invasion. Five ports were used for PPPD and one port was added for hepatectomy. Total operation time was 470 minutes and there was no transfusion.

Results: Patient was discharged at 20 days after surgery with uneventful post–operative course. The patient's final pathology was advanced gallbladder cancer with pancreas head invasion by lymph node metastasis.

Conclusions: Conclusively, we present a successful laparoscopic HPD in gallbladder cancer. Laparoscopic HPD is still a technically challenging procedure, but can be considered a feasible procedure in advanced gallbladder cancer, based on sufficient experience with laparoscopic PPPD and hepatectomy.

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