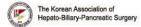


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Extended hepatectomies: our experience from low volume center.

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Introduction : Improved perioperative care combined with proper training has helped in achieving excellent outcomes following liver surgery even in low volume centers. Extended resections require additional surgical skills as well as perioperative care and when done in proper has equally good results. Here, we present the outcome of extended liver resections performed in developing HPB unit of low volume center.

Methods : Retrospective review of the medical records of all the patients undergoing extended hepatectomies were analyzed.

Results : Total 86 liver resections were performed, out of which 61 were major liver resections (Three or more segments) performed over 6 years period. Out of them, total 11(18% of major liver resections) extended hepatectomies have been performed. All were right extended hepatectomies only. For liver augmentation, 2 underwent successful right side and segment 4b portal vein embolization, 2 patients had open right side portal vein ligation and one had ALPPS procedure. Rest of the patients didn't require any augmentation procedures. Postoperatively, 1 patient had grade 3 PHLF, 2 grade 2 PHLF and resolved, 2 bile leaks and resolved. Patient with ALPPS procedure had grade 3 PHLF has died on 3rd postoperativ week. Rest 10 patients were discharged on average of 12 hospital days.

Conclusions : Better patient selection combined with proper training and improved perioperative care, extended hepatectomies can also be safely performed with acceptable outcomes even in low volume centers of developing nations.

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