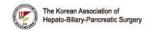
& The 54th Annual Congress of the Korean Association of HBP Surgery

MARCH 25-27, 2021 GRAND WALKERHILL HOTEL, SEOUL, KOREA www.khbps.org



EP038

Long-term outcomes of laparoscopic versus open liver resection for combined hepatocellular-cholangiocarcinoma

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Introduction: Combined hepatocellular–cholagiocarcinoma (cHCC-CCA) is a rare primary hepatic neoplasm. Currently, there are no published studies that analyze the feasibility of laparoscopic liver resection (LLR) in cHCC-CCA alone. This study aims to compare the long-term survival of LLR with open liver resection (OLR) in cHCC-CCA.

Methods: Patients who underwent liver resection for cHCC-CCA from August 2004 to June 2015 were enrolled. Kaplan-Meier survival analysis was performed to analyze the 3-year disease-free survival (DFS) and 3-year overall survival (OS).

Results: A total of 101 patients were enrolled with 25 in the laparoscopic group and 76 in the open group. The 3-year OS was 84% in the laparoscopic group and 90.8% in the open group. The 3-year DFS was 60% in the laparoscopic group and 48.7% in the open group. Hospital stay was significantly shorter in the laparoscopic group $(7.9\pm2.6 \text{ days})$ than in the open group $(16.6\pm11.5 \text{ days})$. Complication (Clavien-Dindo grade II or more) was also less in the laparoscopic group (2, 8%) than the open group (18, 23.7%).

Conclusions: Laparoscopic liver resection for cHCC-CCA is technically feasible and safe, providing short-term benefits without affecting long-term survival.

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