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## **Risk Factors for Deep Incisional and Organ Space Surgical Site Infection after Distal Pancreatectomy**

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**Introduction** : Surgical site infection (SSI) is an infection occurs after surgery in the part of the body where the surgery took place within 30 days and a significant portion of healthcare-associated infections. Distal pancreatectomy (DP) is a major surgery associated with a relatively high incidence of SSI. The aim of this study is to investigate risk factors of SSI after distal pancreatectomy.

**Methods** : In total, 159 patients who underwent DP from Jan 2002 to Dec 2019 were identified and included in this study. We retrospectively collected clinical data based on the medical records of the patients. The risk factors were analyzed by logistic regression analysis.

**Results** : A total of 14 patients (8.8%) developed SSI after DP. Four patient (2.5%) experienced deep incisional SSI and 10 patient (6.3%) had organ space SSI. Male sex was associated with SSI. Hypertension and combined surgery were associated with organ space SSI in univariate analysis. Male sex and hypertension were significant risk factor of organ space SSI in multivariate analysis (p = 0.040, p = 0.032, respectively). Male sex and combined surgery were associated with overall complication (p = 0.039, p = 0.026, respectively). However, age, body mass index, diabetes, diagnosis, type of antibiotics administered, laparoscopic surgery, and spleen preservation were not associated with SSI.

**Conclusions** : respectively). However, age, body mass index, diabetes, diagnosis, type of antibiotics administered, laparoscopic surgery, and spleen preservation were not associated with SSI. Conclusion: Male sex, hypertension, and other concomitant organ resections were statistically associated with SSI. The type of prophylactic antibiotics used was

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