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Spleen-Preserving Distal Pancreatectomy With Vein Scarifying And Artery Saving As An Alternative For Warshaw Method

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Background: When doing a distal pancreatectomy, the complete preservation of splenic vessels is the most dangerous step in preserving the spleen because of the technical difficulties of this sophisticated dissection. The Warshaw method is technically easier in that it sacrifices the splenic vessels, but splenic infarction or gastric varix can occur. In this paper, we introduced a modified method of laparoscopic spleen-preserving distal pancreatectomy (LSPDP) and compared its clinical results with those of the conventional methods.

Methods : We classified those patients planned for LSPDP according to the method used to preserve the splenic vein and artery. The Kimura method preserves both the splenic artery and vein (group K). The Warshaw method sacrificed both the splenic artery and the vein (group W), and the modified Warshaw method (group MK) preserved the splenic artery but sacrificed the splenic vein. We analyzed the surgical outcomes, including late complications, and we compared all groups by employing a post-hoc test.

Results : We analyzed 86 patients. We included 21, 15 and 50 patients in group K, group W and group MW respectively. Among them, group MW had a shorter operation time than did group K (133.3 \pm 36.3 minutes and 193.1 \pm 56.5 minutes, p < 0.001). The incidence of splenic infarction was significantly lower in group MW than it was in group W (1 case, 4.8% and 5 cases, 33.3%, p = 0.035). Long-term follow up revealed that the incidence of varix in group MW was similar to that of group W (1 case, 4.8% and 4 cases, 26.7%, p = 0.084).

Conclusions : Our simple MW technique is effective and safe in that it shortens operative time compared to the Kimura method and reduces splenic infarction compared to the Warshaw method. This method could serve as the one of surgical modalities of LSPDP.

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