

**E71**

Initial Experience Of Pure Laparoscopic Right Hepatectomy After Portal Vein Embolization

Hwui-dong CHO¹, Ki-Hun KIM*¹

¹Division Of Hepatobiliary Surgery And Liver Transplantation, Department Of Surgery, Ulsan University And Asan Medical Center, REPUBLIC OF KOREA

Background : Portal vein embolization is a technique used before hepatic resection to increase the size of remnant liver after surgery. This therapy redirects portal blood to segments of the future liver remnant, resulting in hypertrophy. The purpose of this study was to find out the safety and feasibility of pure laparoscopic right lobectomy after portal vein embolization.

Methods : All consecutive cases of laparoscopic right lobectomy after portal vein embolization between July 2014 and May 2021 in a tertiary referral hospital were enrolled in this retrospective cohort study. All surgical procedures were performed by one surgeon. There were 30 cases of pure laparoscopic right hepatectomy after portal vein embolization. The group was analysed in terms of patient demographics, preoperative data, postoperative outcomes.

Results : The mean age of the donors was 52.5 ± 11.9 years, the gender ratio for men and women was 17:13. The mean operative time was 270.8 ± 57.0 minutes, and the mean postoperative hospital stay except for one patient (her hospital stay was 84 Portal days) was 8.7 ± 3.6 days. The number of complications was 7 cases (23.3%). Among them, there was only one complication (3.3%) of Clavien-dindo classification \geq III. Also, there were no mortality cases.

Conclusions : Portal vein embolization is a good method to safely perform massive hepatic resection by increasing the future remnant liver. This study found that pure laparoscopic right hepatectomy after portal vein embolization is a safe and feasible procedure.

Corresponding Author : **Ki-Hun KIM** (khkim620@amc.seoul.kr)