

Comparative Study between Posterior Approach with Mesopancreatectomy versus Standard Approach in Pancreatoduodenectomy: A Case Control Study

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Abstract

Background: Mesopancreas is the most common site for R1 resection and local recurrence. This study was designed to compare standard pancreatoduodenectomy (PD) versus posterior approach pancreatoduodenectomy PAPD in treating pancreatic head cancer.

Methods: All patients underwent PD for pancreatic head cancers from January 2006 to December 2015 were evaluated. Patients were divided into two groups. Group A patients underwent standard PD and group B underwent PAPD. The primary outcome was post-operative survival.

Results: The study included 210 patients in group A and 77 patients in group B. The mean blood loss was significantly lesser in PAPD group ($P= 0.007$). The number of patients with R1 resection was significantly higher after standard PD group ($P=0.04$). The median survival was 22 months in the standard groups and 23 months in PAPD ($P= 0.001$). 1-, 3-and 5-year actuarial survival were 41 %, 12%, and 0% in standard group and 51%, 21%, and 8% in PAPD.

Conclusion: PAPD allowed complete mesopancreatic excision and has the advantages of easier technique, less blood transfusion, increased R0 resection and better survival than standard PD.

Key words: pancreatic cancer, pancreaticoduodenectomy, posterior approach pancreatoduodenectomy, superior mesenteric artery first approach