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The Double Rubber Band Retraction Technique For The Pure Laparoscopic Living Donor Right Hepatectomy

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Background : Laparoscopic surgery has many advantages including postoperative morbidity, shorter hospital stays compared to open surgery. But, surgeons still face technical difficulties in laparoscopic liver surgery including laparoscopic living donor hepatectomy. This report shows our useful traction skills, including the double rubber band retraction technique in pure laparoscopic living donor right hepatectomy(PLDRH) and perioperative and early postoperative outcomes.

Methods : We retrospectively evaluated 8 patients who underwent PLDRH between September 2021 to December 2022. The data of demographics, perioperative information, and postoperative outcomes were determined. For the surgical methods, the cystic duct stump was ligated using endoloop for external traction during hilar dissection. We also used a method called the double rubber band technique. During liver parenchymal resection, we fixed the rubber bands at the lowest edge and the liver dome at each side to widen the resection plane and pull the upper liver side downwards

Results : The study subjects consisted of 5 males and 3 females, and the mean age was 38 years (range, 25–57 years). The median intraoperative bleeding was 393 cc (range, 130–1100cc). The median operation time was 452 minutes (range, 375–555). There was no case of conversion to open. The mean postoperative hospital stay was 7.3 days. There were only 3 patients (37.5%) with minor postoperative complications.

Conclusions : The liver traction using one rubber band is useful. However, it may not be sufficient to expose the liver parenchyma, because of intra-abdominal space problems and maintaining appropriate traction during liver resection, especially in most upper areas of the parenchymal division. So, our double rubber band technique can be the answer to that problem and also replace the hanging maneuver. And other various methods introduced already can make to ensure safety and help to make an appropriate graft from living donors.

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