HBP SURGERY WEEK 2023

MARCH 23 THU - 25 SAT, 2023 | BEXCO, BUSAN, KOREA www.khbps.org

& The 58<sup>th</sup> Annual Congress of the Korean Association of HBP Surgery



ABST-0170

## ALPPS: A SALVAGE PROCEDURE BEYOND PORTAL VEIN EMBOLIZATION FOR THE TREATMENT OF HEPATIC CANCER.

Nghia PHAN PHUOC, Long TRAN CONG DUY\*

Hepatopancreatobiliary Surgery, University Medical Center At Ho Chi Minh City, VIETNAM

**Background** : Liver cancer is the most common cancer in Vietnam. Along with the current trend of developing techniques in the treatment of hepatobiliary diseases, many patients can approach more radical treatments. In recent times, one of the advanced techniques in the field of liver cancer treatment is Associating Liver Partition and Portal vein Ligation for Staged hepatectomy (ALPPS) procedure - a radical treatment for patients with relatively late stage liver cancer and insufficient future liver remnant that portal vein embolization cannot be performed to enlarge the remnant liver.

**Methods** : A prospective Cohort study was performed from May 2018 at University Mecical Center at Ho Chi Minh city. The inclusion criteria are patients diagnosed with liver cancer who are indicated for right hepatectomy or right trisectionectomy with insufficient future liver remnant and unable to perform percutaneous portal vein embolization.

**Results** : From May 2018 to the end of December 2022, 37 cases that met the inclusion criteria were enrolled in the study. However, there were 8 cases that met the exclusion criteria, so there were 29 patients left in the research. The average age was  $51.34 \pm 14.27$ , male : female ratio was 6.25:1. Hepatocellular carcinoma stage BCLC C accounted for 44.8%. The rate of laparoscopic surgery in stages 1 and 2 was 86.2% and 20.7%, respectively. The median interval between 2 stages of surgery was 32 days (7 to 110 days). The median enlarged liver volume was 168.39ml (69.85 - 445.9 ml), the median hypertrophy rate was 59.08% (20.9 - 243.4%). The rate of complications after stage 1 and 2 were 10.3% and 27.6%, respectively, and there was no perioperative mortality. The mean disease – free survival and overall survival were 26.31 months (95% CI: 16.09 - 36.52 months) and 39.08 months (95% CI: 29.92 - 48.24 months), respectively.

**Conclusions** : ALPPS procedure is an innovation for the treatment of liver cancer that still ensures safety and effectiveness. However, due to the new technique and small sample size, further development and research is needed to evaluate the pros and cons of this promising method.

Corresponding Author : Long TRAN CONG DUY (long.tcd@umc.edu.vn)