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Laparoscopic Total Pancreatectomy, Pancreatic Tail First Approach

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Background : Total pancreatectomy is a uncommon procedure which is the combination of pancreaticoduodenectomy and distal pancreatectomy without pancreatic separation, however the difficulty of surgical resection remains during the uncinate process dissection. Minimally invasive pancreatectomy have increase the difficulty of the procedure because of limited route of surgical approach. The aim of this study demonstrated pancreatic tail first approach for clearly resectable laparoscopic total pancreatectomy.

Methods : A 61-year-old man had been treated as chronic pancreatitis with pancreatic stones for 4 years. He had performed multiple endoscopic treatments and ESWL. Three months before surgery the endoscopic pancreatoscopy was demonstrated fish mouth appearance of ampulla and multiple papillary tumor along main pancreatic duct. The MRCP demonstrated increase degree of pancreatic duct dilatation (predominately at pancreatic body and tail) suggested IPMN of pancreas. Patient was lie in French position. Six laparoscopic post were inserted. The pancreatic tail was first mobilization and selective controlled splenic artery and vein. After complete kocherization the stomach and jejunum were transected. GDA and CBD were transected. The tail of pancreas and spleen was rotated to the right. This maneuver complete exposed SMV and facilitate right approach of uncinate process dissection. After complete resection hepaticojejunostomy was carried out with internal biliary stent. The retrieval bad was removed through the 8-cm. upper midline incision and gastrojejunostomy was performed

Results : The operative time was 630 minutes and total blood loss was 300 ml. The patient was delirium for 4 days because withdrawal of antipsychotic drugs and complete recovery with uneventful. Pathology demonstrated IPMN gastric type tumor from head to tail, with lympho-vascular invasion, lymph nodes uninvolved. Peripancreatic nodule demonstrated Neuroendocrine tumor.

Conclusions : Laparoscopic total pancreatectomy was safe and feasible. Pancreatic tail first approach simplified uncinate process dissection as same as laparoscopic pancreaticoduodenectomy

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