



## BP PP 5-6

## Late Diagnosed Pseudoaneurysm After Pancreaticoduodenectomy Have A Better Outcome Than Those Diagnosed Within 4 Weeks

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**Background** : Pseudoaneurysm (PA) after pancreaticoduodenectomy (PD) is a life-threatening complication. Occurrence of PA is made for various periods from immediately to few weeks after surgery. This study aimed to evaluate the clinical features and treatment outcomes of patients who experienced bleeding of PA after PD according to the timing of occurrence.

**Methods** : This single-center retrospective study included 208 patients who underwent PD between March 2000 and September 2022. We also conducted a literature review. We divided study population into early and late groups based on 4 weeks after PD.

**Results** : Among 208 patients, 11 (5.3%) developed PA following PD. Median duration between PD and detection of PA was 25 (5-42) days. The location of PA were hepatic artery in 8 and gastroduodenal artery (GDA) in 3. Nine patients (81.8%) presented with bleeding, of which 5 were intraluminal and 4 were extraluminal. Nine patients were treated by endovascular intervention (4 embolization and 5 stent graft insertion) and two died before intervention. Of the 119 patients within 7 available studies, 88 were classified into early group and 31 into late group. Patients in late group had significantly lower mortality (23.9 vs 3.2%,  $p=0.011$ ), fewer GDA origin (43.2 vs 16.1%,  $p=0.026$ ), and more gastrointestinal bleeding (27.8 vs 57.1%,  $p=0.001$ ) than those in early group.

**Conclusions** : This study demonstrated that late diagnosed PA after PD have a better outcome than those diagnosed within 4 weeks. Bleeding of PA occurring within 4 weeks after PD should be aggressively managed to reduce mortality and the occurrence of PA should be suspected in delayed gastrointestinal bleeding after PD.

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