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## Inferior-Medial Approach For Laparoscopic Splenic Vesselpreserving Distal Pancreatectomy : A Single Surgeon's Experience

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**Background** : Complete preservation of splenic vessels is an ideal procedure in laparoscopic spleenpreserving distal pancreatectomy (LSPDP). However, the preservation of splenic vessels is still challenging and time-consuming procedure during LSPDP because the splenic vein is often deep embedded into the pancreas parenchyme. Herein, this study aimed to introduce our inferior-medial approach during laparoscopic splenic vessel-preserving distal pancreatectomy (lap-SVPDP) and evaluate the feasibility for this technique.

**Methods** : Total 43 patients underwent LSPDP by single surgeon in our institution and among them, 26 patients (60.5%) received Lap-SVPDP with inferior-medial approach and 17 patients underwent a laparoscopic Warshaw technique (lap-WT). We compared outcomes of these two groups to evaluate the efficacy of our spenic vessel preservation technique.

**Results** : None of patients undergoing lap-SVPDP required conversion to an open operation or lap-WT technique. Most perioperative outcomes were not different between the two groups and the operation time and intraoperative blood loss in lap-SVPDP group were not different than that in lap-WT group in spite of technical complexity. Moreover, postoperative complication rates including pancreatic fistula were not different between the two groups. The mean of tumor size (P = 0.03) were higher in lap-WT group than lap-SVPDP group. (p=0.001). Morover, splenic vein patency rate in lap-SVPDP group was not inferior to that in open DP with splenic vessel preservation which was performed by same single surgeon.

**Conclusions** : This technique could be a safe and feasible technique for LSPDP and our lap-SVPDP may contribute to safer and easier laparoscopic distal pancreatectomy with Ittle blood loss and short opertion time. Moreover, this technique might give more chance to save splenic vessels in patients with pancreas tail tumor.

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