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Comparison Of Laparoscopic Radical Cholecystectomy And Open Radical Cholecystectomy For Stage III Gallbladder Cancer

Jiayu SHI¹, **Xuewei JIANG***¹, Chao WANG², Binhao ZHANG²

¹Department Of Hepatobiliary Surgery, Tongji Tianyou Hospital Affiliated To Wuhan University Of Science And Technology, CHINA

²Center Of Liver Surgery, Tongji Hospital, Tongji Medical College, Huazhong University Of Science And Technology, CHINA

Background: To compare the clinical efficacy of laparoscopic surgery and open surgery in patients with stage III gallbladder cancer.

Methods: The clinical characteristics and postoperative follow-up data of 184 patients who underwent radical cholecystectomy for gallbladder cancer in Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, from May 2015 to May 2022, were retrospectively analyzed. There were 71 cases in the laparoscopic group and 113 in the open group. The two groups' general medical data (age, gender, BMI, liver function, albumin, tumour differentiation, etc.), surgery-related indicators (operation time, intraoperative bleeding, lymph node dissection, and the extent of liver resection); postoperative conditions (liver function, abdominal drainage tube removal time and postoperative hospital stay, etc.); complications (bile leakage, abdominal infection, thrombosis, etc.); overall survival and progression-free survival, were analyzed.

Results: There was no significant difference between the two groups in general case data, operation situation, overall survival and progression-free survival. The laparoscopic group showed better postoperative liver function recovery (alanine aminotransferase, aspartate aminotransferase, albumin), earlier abdominal drainage tube removal (8.34±5.00 days vs 5.18±3.90 days), shorter hospital stay (12.01±5.99 days vs 15.51±9.89 days) and lower incidence of complications (14.1% vs 31.9%), when compared with the open group (P<0.05).

Conclusions: Laparoscopic surgery for AJCC TNM stage III gallbladder cancer is comparable with open surgery in terms of efficacy. Compared with open surgery, laparoscopic radical resection of gallbladder cancer has the advantages of earlier removal of abdominal drainage tube, lower incidence of postoperative complications, and reduced hospital stay.

Corresponding Author: **Xuewei JIANG** (jjjxw99@163.com)