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The Clinical Difference And CT Finding Of Fluid Collection After Laparoscopic Distal Pancreatectomy According To Spleen And Splenic Vessel Preservation.

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Background : Pancreatic fistula and peripancreatic fluid collection after distal pancreatectomy can occur at any time and affects the clinical course of the patients. Fluid collection of postoperative CT finding does not usually cause patient symptoms. However, some studies have reported that fluid collection is associated with clinically relevant pancreatic fistula and intervention. The purpose of this study was to study the differences and aspects of fluid collection in laparoscopic distal pancreatectomy with splenectomy and spleen preservation (spleen vessel preservation and warshaw technique)

Methods : This study enrolled 75 patients who underwent laparoscopic distal pancreatectomy. All of this operation was performed in benign and borderline pancreatic tumor patients. Fluid collection was defined as a loculated and measurable lesion in CT imaging at postoperative 7 day. We divided 3 groups (with splenectomy (Group1), splenic vessel preservation(Group2), warshaw technique (Group3))

Results : Fluid collection was observed in 51 patients (68.9%). The 51 patients consisted of 19 patients (37.3%, Group1) and 29 patients (56.9%, Group 2) and 3 patients (5.9%, Group 3). The size of peripancreatic fluid collection was 3.41cm (SD, 2.02)(Group1, 3.66cm; Group 2, 3.35cm; Group 3, 3.35cm). The mean of CRP level at postoperative 7 day was 36.01. (Group 1, 36.68; Group 2, 35.9; Group 3, 38.81) Clinically relevant POPF was observed in 3 patients (each 1 patient in Group1,2,3). Peculiarly, in patients with splenic vessel preservation, In addition to peripancreatic fluid collection, there was also a large amount of fluid collection around the splenic vessels(2.4~9cm).

Conclusions : In the case of laparoscopic distal pancreatectomy, fluid collection was observed more in spleen preservation than with splenectomy, especially in the splenic vessel preservation technique. Although spleen vessel preservation is a good surgical method to preserve spleen function and reduce splenic infarction, however, fluid collection may have clinical significance. Therefore, the choice of surgical method should be carefully considered because it affects other complication and patient's outcome.

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