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Initial Experience Of Pancreaticoduodenectomy (PD) At Shaukat Khanum Memorial Cancer Hospital & Research Centre, Peshawar, Pakistan

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Background : PD is a complex procedure with mortality less than 1-2% in high-volume centers, however post-operative morbidity remains high, affecting approximately 52% of patients. We established our Hepatico-Pancreatico-Biliary (HPB) unit in a resource limited province of Pakistan in April 2021. There were a lot of challenges including developing of workforce and financial or equipment constraints. The purpose of this study is to determine short-term survival rates and peri-operative outcomes in our setting over the last year and compare the outcomes to published standards.

Methods : This retrospective study has been conducted on patients who underwent PD from May 2021 to July 2022. Demographics were recorded and short term outcomes including length of stay, blood loss, readmission rates, 30 and 90 day mortality were looked into. SPSS 20 was used to do statistical analysis.

Results : 39 patients were planned to undergo Whipple's procedure with curative intent. 32 patients (82.05%) underwent PD and 6 patients (15.38%) had advanced disease on laparoscopy. 10 patients underwent totally laparoscopic pancreatico-duodenectomy, 8 patients underwent laparoscopic converted to open pancreatico-duodenectomy and the remaining underwent open surgery. The primary site was Periapillary (59.4%), Pancreatic (25%), and Duodenum (15.6%). The mean age of these patients was 46.37 years. Portal vein resection and primary repair was undertaken in 3 patients. The most common complication was SSI (28.1%), followed by Delayed Gastric Emptying (18.8%), Type B Pancreatic Leak (12.5%), and 1 case of bile leak (3.1%) for which relook laparotomy was performed. The rate of 90-day mortality after surgery was 0. The median length of hospital stay was 6 days. The readmission rate was 9.4%. Mean operative time was 7.20 hours, blood loss 313.43 milliliters, R0 resection rate 93.8%, and lymph node yield was 16.25.

Conclusions : Despite being a new Hepato-Pancreatico-Biliary Unit, our short-term perioperative outcomes are consistent with acceptable standards.

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