

Abstract for IASGO 2018 at Moscow

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Topic

Combined Modified Blumgart and dunking technique for pancreaticojejunostomy in total laparoscopic pancreaticoduodenectomy

Background

Pancreatoduodenectomy (PD) was the complex procedure include resection phase and reconstruction phase for treat periampullary lesion .

Laparoscopic approach was new and challenging for surgeons that have to understand in pancreatic anatomy and have high minimally invasive surgery skill such as suturing and dissecting with laparoscopic device

Postoperative pancreatic fistula is the most terrible complications of PD that cause abdominal abscess , intra-abdominal hemorrhage and death

Modified Blumgart technique was eliminate tangential tension and shear force between fragile pancreas and jejunum in pancreaticojejunostomy(PJ)

For the small pancreatic duct, PJ anastomosis by dunking technique was recommended for reduce post operative pancreatic fistula.

Material and Methods

This video was demonstration how to perform total laparoscopic PD with PJ anastomosis by modified Blumgart and dunking technique in patient with distal CBD lesion

Result

patient was good recovery with operative time 8 hr ,estimated blood loss 100 cc with no complication patient was discharge at postoperative day 10.

Conclusion

Total laparoscopic PD was safe and feasible

SMA and SMV were identified and dissection by medial uncinata approach

For soft pancreatic parenchyma and small pancreatic duct, pancreaticojejunostomy was safe to performed by Modified Blumgart and invagination technique