Robotic Hilar cholangiocarcinoma Radical Resection compared with Laparotomy in prognosis

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Introduction: Performing robotic resection for the treatment of hilar cholangiocarcinoma (HCC) is not universally accepted as an alternative approach to open surgery, and only a limited number of such procedures have been reported due to the difficulty of radical resection and the lack of consensus regarding the adequacy of this approach. We aimed to describe our experience with robotic HCC radical resection with long-term outcome and to compared its short-term outcome with those of open HCC radical resection in HCC patients.

Methods: We retrospective reviewed medical records of 45 patients who underwent robotic approach and open approach between January 1st 2016 and December 31st 2016 at the department of HPB oncology surgery in Chinese PLA general hospital. All cases were confirmed by pathology histological.

Results: The retrospective study contains 15 females and 30 males, with mean age was 62.5±9.3. R0 rate was 71.1%. With 23 months follow-up, there was no significant difference in overall survival between two group and 1-year overall survival rate was 57%. Also, there was no statistically significant different in tumor size, resection margin, 30-days mortality and short-term complication including DGE, massive hemorrhage and surgical related infection between two group. However, the robotic resection group show longer operating time, less estimated intraoperative blood loss, less fasting days, shorter hospital stay and higher total costs.

Conclusions: Compared with laparotomy, robotic HCC radical resection could concluded as an equivalence or non-inferiority approach with acceptable long-term outcome.

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