Laparoscopic Hepatectomy for Hepatocellular Carcinoma

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Background: Laparoscopic liver resection has become an increasingly popular operation but still limited and theoretical benefits remain unproven. There are a few reports of the advantages of laparoscopic liver resection of hepatocellular carcinoma (HCC). The purpose of this study was to evaluate the short-term results of laparoscopic liver resection.

Methods: From July 2007 to February 2010, 56 patients with HCC who underwent laparoscopic liver resection in Asan Medical Center. Data for all resections were recorded and analyzed retrospectively to assess sex, age, pathology report, blood loss, hospital stay, tumor site, mobidity and mortality.

Results: The mean age was 55.3±9.72 (35～70) years old and mean tumor size was 2.82±1.19 (1.0～5.5) cm. The tumors were located on 37 left lateral section (segment II or III), 4 left medial section (segment IV) and 15 right lobe. The type of operations were 33 left lateral sectionectomy, 10 partial hepatectomy, 6 left hepatectomy, 1 laparoscopic right hepatectomy, 3 lap-ass right hepatectomy and 3 laroscopic assisted right posterior sectionectomy. The mean operative time was 222.40±106.6 min, and mean blood loss was 282.14±120.88 ml. The mean resection margin was 1.65±1.16 cm. There was no in hospial mortality, and only one patient had postoperative complication as wound seroma. Return to normal diet was achieved on average 1.87 days. The mean hospital stay was 8.8±2.34 days.

Conclusion: Laparoscopic liver resection for HCC is feasible and safe in our experiences. This procedure is developing and safe technique in selected patients including those with malignancies, resulting in short hospital stays, rapid return to normal diet, full mobility and minimal morbidity with acceptable oncological parameter.