

# **Distal Pancreatectomy with Celiac Axis Resection for Pancreatic Body and Tail Cancer Invading Celiac Axis. - An effort to achieve Curative resection -**

Sang Geol Kim, Hyung Jun Kwon

Department of Surgery, Kyungpook National University Medical Center

Pancreatic carcinoma of body and tail often involves the common hepatic artery and/or celiac axis and it is regarded as an unresectable disease. To treat the patients with such diseases, we employed distal pancreatectomy with en-bloc celiac axis resection (DP-CAR) and reviewed our experiences. Since June 2011, we performed DP-CAR for seven patients with pancreatic body and tail cancer involving the celiac axis. The indications of DP-CAR initially included tumors with definite invasion of celiac axis and later expanded to include the borderline resectable pancreatic cancer. To determine the effect on the surgical outcome of DP-CAR, the clinico-pathological data of patients who underwent DP- CAR were compared to both DP group (22 patients of distal pancreatectomy for pT3 and pT4 tumors) and NR group (17 patients of no resection group). Seven patients underwent DP-CAR since 2011. The R0 resection rate was 71.4% and was not statistically different compared to DP group ( $p=0.136$ ). The median operative time ( $p=0.028$ ) and length of hospital stay after surgery ( $p=0.051$ ) were significantly longer in DP-CAR group but no significant difference was found in incidence of the POPF compared to DP group ( $p=0.272$ ). In DP-CAR group, focal hepatic infarction and transient hepatopathy occurred in 1 patient (14.3%) and 3 patients (42.9%) respectively. None of the 7 patient in DP-CAR group had ischemic gastropathy, hepatic failure and bleeding. No mortality occurred in DP-CAR group. The median survival time (MST) was 15 months in DP-CAR group and 25 months in DP group ( $p=0.681$ ). However, the MST of DP-CAR group was significantly longer than that of no resection group ( $p=0.000$ ). In conclusion, according to our experience, DP-CAR was safe and offered high

R0 resection rate for patients with pancreatic body and tail cancer with involvement of celiac axis. The effect on survival of DP-CAR is comparable to DP and better than that of no resection.