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Hepatopancreatoduodenectomy (HPD) for cholangiocarcinoma

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Abstract: Major hepatectomy combined with pancreateoduodenectomy [hepatopancreatoduodenectomy (HPD)], is indicated for laterally advanced cholangiocarcinoma. Since Takasaki et al. first introduced HPD for the treatment of locally advanced gallbladder cancer in 1980, many Japanese surgeons and a small number of Western surgeons have employed this extended procedure for the treatment of biliary cancer. However, limited number of patients and high rate of mortality hindered our ability to reach to definitive conclusion regarding the survival benefit of this procedure. Even today, HPD for biliary cancer remains controversial and is the most challenging operation. In 2012, we reported the surgical outcome of 85 patients with cholangiocarcinoma who underwent HPD. The main tumor location was perihilar in 59 patients and distal in 26 patients. The types of hepatectomy performed included right-sided hepatectomy in 55 patients, left-sided hepatectomy in 23 patients, and central hepatectomy in 7 patients. Combined portal vein resection was performed in 24 patients, and hepatic artery resection was performed in 7 patients. Despite this aggressiveness, mortality rate was only 2.4%, and overall 5-year survival rate was 37.4%. Survival rate of 57 patients with pM0 disease who underwent R0 resection was 54.3%. Our data demonstrate that HPD can be performed with low-mortality rate and offers improved chance of long-term survival in selected patients. We stress that HPD is an important procedure for treating extensively spreading cholangiocarcinoma that is otherwise unresectable, and it is now the fourth standard procedure following hepatectomy, bile duct resection, and pancreateoduodenectomy. The current challenge is super-extended resection, i.e., hepatoligamento-pancreateoduodenectomy (HLPD), in which HPD is performed with an en bloc resection of the hepatoduodenal ligament requiring the simultaneous resection of the portal vein and hepatic artery. Till date, we have performed this super-extended surgery in 9 patients. I will mention its outcome in this lecture.

Keywords: Hepatopancreatoduodenectomy (HPD); cholangiocarcinoma