BACKGROUND

- Pancreatic cancer has the lowest five-year survival rate of any major cancer (9%). It is expected to become the second leading cause of cancer-related death in the United States around 2020.
- Our aim is to report the results in the surgical treatment of pancreatic head and periampullary neoplasms with emphasis on surgical technique and short-term postoperative outcome.

METHODS

- Patients with resectable pancreatic head and periampullary neoplasms were selected (n=99).
- ISGPF classification was used to define postoperative pancreatic fistula.
- Survival curves were estimated by K-M Analysis.

RESULTS

- Mean age was 51.4 ± 14.2 years.
- Most common tumor was periampullary (50.5%) followed by pancreatic head (32.3%).
- 51.5% of the patients received adjuvant chemotherapy.

CONCLUSION

- Pancreaticoduodenectomy is a safe procedure with excellent postoperative outcome and survival, if carried out in a specialized hepato-pancreato-biliary unit with multidisciplinary team management.
- PG reconstruction can be a safer alternative to PJ especially in patients with soft pancreas and non-dilated duct.