A Series of Laparoscopic Liver Resections with or without HALS in Patients with Hepatic Tumors

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摘要

Abstract

Background　Differences were compared between laparoscopic surgery with and without hand-assisted laparoscopic technique (HALS) in order to assess whether HALS is a safe and feasible alternative to laparotomy and to determine what factors contributed to successful laparoscopic liver surgery.

Method　From a total of 416 liver resections, 45 patients with 46 hepatic tumors were chosen for laparoscopic liver resection with or without a hand-assisted technique. For each patient, her/his surgical duration, intraoperative blood loss, tumor size and location, hospital stay after surgery, mortality, and morbidity were recorded for analysis.

Results　The 45 surgical laparoscopic liver resections included 19 left lateral lobectomies, three hemihepatectomies, three segmentectomies, and 21 partial hepatectomies. A HALS was used more frequently in the right posterior group (14/16) than in the anterior group (6/29). There was no notable difference between these two groups in terms of tumor size, mean surgical time, blood loss during surgical procedure, hospital stay after surgery, and occurrence of complication.

Conclusion　Surgical results between HALS and non-HALS usage were similar except for higher blood loss with HALS, higher use of HALS when liver cirrhosis was present, and less likelihood of using HALS when there was a superficial location of the tumor or lesion.