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Laparoscopic Right Posterior Sectionectomy: Single-Center Experience and Technical Aspects

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Abstract

Purpose: Laparoscopic right posterior sectionectomy (LRPS) is a technically demanding procedure. The aim of this article is to share our experience with LRPS and to highlight technical aspects of this procedure.

Methods: This is a single-center retrospective analysis of all patients who underwent LRPS between September 2011 and October 2017. Data were retrieved from a prospectively maintained database. Video-in-picture (VIP) technology is used to facilitate and to highlight the technical aspects of this procedure.

Results: In total, 18 patients underwent LRPS. Indication for surgery was mainly liver metastases (n = 11) and hepatocellular carcinoma (n = 6). The Glissonean approach for inflow control was used in 13 patients. Median operative time was 162 (140-190) minutes. Median blood loss was 325 mL (IQR: 150-450). One conversion (5.5%) was required. There were two minor complications and one major complication. Median hospital stay was 6 days (range 5-8 days). All patients had an R0 resection. There was no 90-day mortality.

Conclusion: The results of our experience in LRPS add weight to the feasibility and safety of this approach.