

Pancreatoduodenectomy after NACRT for PDAC

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Lecture : Pancreaticoduodenectomy after neoadjuvant chemoradiation therapy for pancreatic cancer is often technically challenging. Although the dissection is more difficult comparing to those cases without neoadjuvant treatment, the reconstructions after resection are often straightforward with less fistula rate.

We recommend open surgery for any borderline resectable or locally advanced pancreatic cancer due to the shorter surgery time. At the same operation, we will start with diagnostic laparoscopy to rule out the liver metastasis and carcinomatosis because up to 8% patients have occult metastasis.

Minimally invasive pancreaticoduodenectomy such as robotic approach can be safely performed when no vascular reconstruction is necessary. Here we presented a patient with pancreatic cancer after neoadjuvant chemotherapy and radiation therapy who underwent robotic pancreaticoduodenectomy.

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