
LV OP 3-4**Laparoscopic Repeat Liver Resection; Short-term Outcomes**

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Introduction : Laparoscopic liver resection (LLR) is now accepted as a primary tool of surgery for many liver tumors including hepatocellular carcinoma (HCC) and metastatic liver tumors. Repeat LLR (R-LLR), however, is performed far less frequently. So the authors conducted this study to evaluate the short-term outcome of R-LLR.

Methods : We reviewed a prospectively collected database of 100 patients who underwent laparoscopic liver resections (LLR) from Aug 2008 to Oct 2018. Data of 10 patients undergoing R-LLR were analyzed and compared to 1) the primary LLR group (P-LLR, n = 90) and 2) repeat open liver resection group (R-OLR, n = 20), that was performed during the same period for almost the same indications.

Results : There was no perioperative mortality in any of these 120 patients. 10 R-LLR's were performed for HCC (5), colorectal liver metastasis (3), prostatic cancer liver metastasis (1) and liver cyst (1). Open conversion rates were 20% for R-LLR and 3% for P-LLR ($p=0.077$). Between the repeat and primary LLS groups, there was no significant difference in operative time, intraoperative bleeding amount, intraoperative transfusion rate, length of stay (LoS) and postoperative complication rates. When compared R-LLS group to R-OLR group, operative time and length of stay were different significantly, favoring laparoscopic approach for repeat liver resection.

Conclusions : Repeat liver resection can be done by laparoscopic approach safely and with shorter operative time and length of stay than by open approach in selected patients. More experiences are needed to define the role of repeat-LLR for recurrent liver tumors.

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