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A preoperative imaging scoring system is helpful in making a spleenpreservation strategy during laparoscopic distal pancreatectomy

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Introduction : A reasonable surgical plan is crucial to laparoscopic spleen preserving distal pancreatectomy. This study aimed to propose a preoperative image classification and scoring system, and evaluated the predictive values in making a spleen-preservation strategy.

Methods : Patients with benign or low-grade malignant tumors underwent laparoscopic distal pancreatectomy at our hospital were collected from a prospective database. Clinical parameters and preoperative imaging were reviewed and analyzed.

Results : 43 cases were collected, including Kimura procedure (n=14), Warshaw procedure (n=19), and splenectomy (n=10). According to the relationship between tumor and splenic vein presented by preoperative imaging, an image classification with four types were proposed. We showed the distance from left margin of tumor to splenic hilum was significantly associated with spleen-preservation. Additionally, we found image classifications and tumor size were significantly associated with spleen-preservation method. Then we established a scoring system by combination of these two parameters, which showed when cut-off value was set to 2 scores, the sensitivity and specificity of predicting a Warshaw procedure were 94.74% and 64.29%, respectively.

Conclusions : The preoperative image classification and scoring system might be helpful in making a spleenpreservation strategy during laparoscopic distal pancreatectomy. Further studies with larger samples are needed to confirm the predictive value.

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