

P111**Total pancreatectomy is safe and could achieve good oncological outcomes in IPMN patients**

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Introduction : Total pancreatectomy (TP) was once thought to have high morbidity and mortality and greatly affect the patients' quality of life. Recent advances in surgical techniques, perioperative managements and synthetic supplementary drugs have renewed the interest for TP. In this study, we analyzed the short-term and long-term outcomes following TP in our department.

Methods : Consecutive patients undergoing TP from June 2005 to March 2018 in Zhongshan Hospital, Fudan university were included. Investigations on clinicopathological characteristics, operative details, postoperative outcomes and long-term survival of TP patients were performed.

Results : Forty-three patients were enrolled and the most common pathological entireties were pancreatic ductal adenocarcinoma (PDAC) and intraductal papillary mucinous neoplasm (IPMN). The complication rate was 76.7% with a 30-day mortality rate of 7.0%. And the median overall survival of the cohort was 18.7 months. Comparative analysis between the PDAC and IPMN groups showed the IPMN patients were associated with lower transfusion, vascular resection and intra-abdominal infection rates and shorter postoperative hospital stays. Further analysis indicated the IPMN patients acquired better long-term survival after TP.

Conclusions : TP is feasible and could achieve good oncological outcomes when applied to selected patients, and IPMN is superior to PDAC as an indication for this procedure.

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