P131

Comprehensive Complication Index or Clavien-Dindo Classification: Which is better for evaluating severity of postoperative complications following pancreatectomy?

Sung Hyun KIM, Ho Kyoung HWANG, Kyung Sik KIM, Dong Sub YOON, Woo Jung LEE, Chang Moo KANG[*]

Hepatobiliary and Pancreatic Surgery, Yonsei University College of Medicine, Korea

Introduction : Complication classification is an important index for evaluating immediate postoperative outcomes. Currently, the Clavien-Dindo Classification (CDC) is widely used for complication classification. Recently, the Comprehensive Complication Index (CCI) has been introduced. Unlike the CDC, the CCI incorporates all complication severities. The aim of this study is to validate CCI in relation to CDC.

Methods : Records from 222 patients who had undergone radical pancreatectomy from April 2015 to October 2016 were prospectively reviewed. CCI was calculated, and the relationship with postoperative day (POD) and cost was assessed in relation to CDC. A Hotelling's two-sample dependent test for correlations was used to calculate significant differences between the correlation coefficients of CDC and CCI parameters.

Results : Complications occurred in 211 patients (95.0%). The correlation between CDC and CCI was $r = 0.938$, $p < 0.001$. Compared to CDC, CCI showed significantly stronger correlations with POD and cost (POD: CCI vs. CDC, $r = 0.725$ vs. $r = 0.630$, $p < 0.001$; Cost: CCI vs. CDC, $r = 0.774$ vs. $r = 0.723$, $p < 0.001$).

Conclusions : CCI is a precise complication classification that could be used to identify risks in surgical patients and is comparable to CDC.

Corresponding Author. : **Chang Moo KANG** (cmkang@yuhs.ac)