【格式範例】 腹腔鏡和傳統切肝手術治療肝癌之術後長期及短期結果比較

蔡葵諺^{1,2,4} 陳信安^{1,3} 王萬榆^{1,4} 黃銘德^{2,4}

¹台北醫學大學-部立雙和醫院外科部一般外科 ²外科部消化外科 ³國立台灣大學附設醫院外科部一般外科 ⁴台北醫學大學醫學院醫學系外科學科

Long-term and short-term surgical outcomes of laparoscopic versus open liver resection for hepatocellular carcinoma

<u>Kuei- Yen Tsai</u>^{1,2,4}, Hsin- An Chen^{1,3}, Wan- Yu Wang^{1,4}, Ming- Te Huang^{2,4}

¹ Division of General Surgery and ² Digestive Surgery, Department of Surgery, Taipei Medical University- Shuang Ho Hospital, New Taipei City, Taiwan
³ Division of General Surgery, Department of Surgery, National Taiwan University Hospital, Taipei, Taiwan
⁴ Department of Surgery, School of Medicine, College of Medicine, Taipei Medical University, Taipei, Taiwan

Purpose:

This retrospective study compared the short- and long-term outcomes of laparoscopic liver resection (LLR) and open liver resection (OLR) and identified patients who might gain more benefits from LLR.

Materials and Methods:

The demographic and perioperative data, short-term surgical outcomes, and long-term oncological results of all 313 patients who received elective liver resection for hepatocellular carcinoma (HCC) between January 2010 and June 2017 were analyzed. The patients were(實際打字時整段須完整,勿以.....表示,請分段)

Results:

LLR was performed in 153 patients and OLR in 160 patients. LLR is associated with less blood loss (p < 0.001), shorter surgical time (p = 0.001), shorter length of hospital stay (p < 0.001), and lower morbidity rate (p = 0.034). The 5-year overall survival (OS) rates in the LLR group(實際打字時整段須完整,請勿以……表示,請分段)

Conclusions:

LLR for HCC is a safe and feasible procedure that does not compromise long-term oncological outcomes. In early tumor stages, LLR might be(實際打字時整段須完整,請勿以……表示,請分段。) (論文摘要最多2頁為宜)