

Meeting abstract

Open Access

Radical surgical treatment of duodeno-pancreatic neoplasms in elderly patients: our experience

A Oldani*, F Butera and M Garavoglia

Address: Clinica Chirurgica, Università del Piemonte Orientale "A. Avogadro", Azienda Ospedaliera "Maggiore della Carità", Novara, Italy

* Corresponding author

from XXI Annual Meeting of The Italian Society of Geriatric Surgery
Terni, Italy. 4–6 December 2008

Published: 1 April 2009

BMC Geriatrics 2009, 9(Suppl 1):A63 doi:10.1186/1471-2318-9-S1-A63

This abstract is available from: <http://www.biomedcentral.com/1471-2318/9/S1/A63>

© 2009 Oldani et al; licensee BioMed Central Ltd.

Aim of the study

To evaluate the results of surgical treatment of duodeno-pancreatic neoplasms in elderly patients, in terms of mortality, morbidity and survival.

Materials and methods

From 01/01/1994 to 01/10/2008 48 patients aged more than 65 years old, 29 males (60.42%), 19 females (39.58%) mean age 67 years old (range 65–81), underwent radical surgery for duodeno-pancreatic neoplasms.

24 patients (50.00%) were affected by pancreatic head carcinoma, 5 (10.42%) by distal common bile duct cancer, 11 (22.92%) by ampullary cancer, 4 (8.32%) by duodenal carcinoma, 1 (2.08%) by infiltrating right colon carcinoma, 2 (4.16%) by distal pancreatic cancer, 1 by focal pancreatitis.

Results

44 patients (91.67%) underwent pancreaticoduodenectomy (37 standard, 7 extended, with Wirsung gastric anastomosis in 19 cases, Wirsung-jejunal anastomosis in 34, and Wirsung closure in 1); 3 patients (6.25%) underwent total pancreaticoduodenectomy, 1 patient distal pancreatectomy. 2 patients were also treated with IORT. Perioperative mortality was 4.16%, morbidity was 10.42% (2 cases of peritoneal bleeding, 3 gastrointestinal bleeding, 2 portal thrombosis, 1 pancreatic fistula). 3 years survivorship was 22% (N0:18%, N1:2%); 5 years survivorship was 16% (N0:14%, N1:2%). Causes of death were liver metastasis (29.17%), local recurrence (10.42%), cardiovascular and cerebrovascular events (4.16%).

Conclusion

Radical surgery for duodeno-pancreatic tumors could be a good option in elderly patients; despite comorbidities, in our experience we observed good results in terms of survival and morbidity, similar to what observed in younger patients.