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What are the Particularities of Pancreatic Surgery in the Cirrhotic Patient?

Lilian Schwarz, Jean-Marc Regimbeau, Lionel Rebibo
[1]Department of digestive surgery, CHU Rouen, 76000 Rouen, France
[2]Department of digestive surgery, CHU Amiens, 80054 Amiens, France
[3]Department of digestive surgery, Hôpital Bichat, APHP, Paris, France

Abstract
The objective of this work was to review the entire literature on pancreatic surgery in order to best define the surgical indications and the specifics of their management. The bibliographic research was done on Pubmed over the period from January 1995 to June 2015, using French and English as the languages of publication. The two main indications discussed here are the management of cancer and chronic pancreatitis. Surgery in the cirrhotic patient exposes the patient to a higher risk of complications than in the non-cirrhotic patient. Child-Pugh and MELD scores should be used to assess risk and guide operative decision. Child-Pugh classes B and a MELD score value greater than 15 are associated with higher morbidity and mortality. However, if suitable selection is made of cirrhotic patients who are candidates for pancreatic surgery, long-term survival seems to be equivalent to the non-cirrhotic group. No risk factors for long-term survival have been reported. In conclusion, cirrhotic patients, candidates for pancreatic surgery must be correctly selected, cirrhosis exposes to a higher risk of postoperative morbidity and mortality.
Key words: cirrhosis, pancreatic surgery, chronic pancreatitis