

2022 年韓國胰臟癌手術實行指引-依循醫學證據總結

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Invited Article

Korean Surgical Practice Guideline for Pancreatic Cancer 2022: A summary of evidence-based surgical approaches

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Pancreatic cancer is the eighth most common cancer and the fifth most common cause of cancer-related deaths in Korea. Despite the increasing incidence and high mortality rate of pancreatic cancer, there are no appropriate surgical practice guidelines for the current domestic medical situation. To enable standardization of management and facilitate improvements in surgical outcome, a total of 10 pancreatic surgical experts who are members of Korean Association of Hepato-Biliary-Pancreatic Surgery have developed new recommendations that integrate the most up-to-date, evidence-based research findings and expert opinions. This is an English version of the Korean Surgical Practice Guideline for Pancreatic Cancer 2022. This guideline includes 13 surgical questions and 15 statements. Due to the lack of high-level evidence, strong recommendation is almost impossible. However, we believe that this guideline will help surgeons understand the current status of evidence and suggest what to investigate further to establish more solid recommendations in the future.

Key Words: Pancreatic carcinoma; Surgery; Practice guideline

關鍵問題與推薦 (Key questions and recommendations)	推薦強度 (Strength of recommendation)	證據等級 (Level of evidence)
Q:可切除胰臟癌(RPC)是否常規指示分期腹腔鏡檢查? R:在 RPC 患者開腹手術之前,可以選擇性地考慮分期腹腔鏡檢查。	有條件地	低
Q:微創手術(MIS)是否適用 RPC 患者? R:經驗豐富的外科醫生可以選擇性地對 RPC 患者進行 MIS。	有條件地	低
Q:對可切除胰臟頭部癌患者,在胰十二指腸切除術(PD)是否需要擴大淋巴結清掃(LND)和神經叢清掃? R:不建議對 RPHC 患者擴大 LND。	不推薦	高
Q: 聯合門靜脈(PV)或腸系膜上靜脈(SMV)切除術對患有胰臟癌合併門靜脈或上腸系膜靜脈侵犯的患者有益嗎? R: 如果患者可以根治性切除,可以考慮門靜脈或上腸繫膜靜脈切除。	有條件地	低
Q: 腸系膜上動脈(SMA)切除術對侵襲 SMA 的胰腺癌患者有益嗎? R: 不建議對侵犯 SMA 的胰腺癌患者進行 SMA 切除術。	不推薦	低
Q: 胰尾切除合併腹腔軸切除手術(DP-CAR)對胰臟癌侵犯腹腔軸的患者有益嗎? R: 如果患者可以接受根治性切除,DP-CAR 可以考慮。	有條件地	低
Q: PD 期間胰臟繫膜切除術(MpE)是否有益? R: MpE 可考慮施行以提高 RPHC 患者的 R0 切除率	有條件地	低
Q: 在 RPHC 中,保留幽門的胰十二指腸切除術(PPPD)是否優於 PD? R: 在 RPHC 中,PPPD 優於 PD。	有條件地	高
Q: 在胰臟切除邊緣陽性的情況下是否需要額外的胰臟切除術中冷凍活檢? R: 如果術中冰凍活檢胰臟切除邊緣呈陽性,可以考慮額外的胰臟切除術。	有條件地	低
Q: 根治性順行模塊化胰脾切除術(RAMPS)對胰體癌或胰尾癌有益嗎? R: RAMPS 可考慮用於胰體癌或胰尾癌。	有條件地	低
Q: 在無法切除的胰臟癌病患,且無胃出口阻塞下,是否需要分流性胃十二指腸吻合術(bypass gastrojejunostomy)? R: 不建議在不可切除胰臟癌的患者且無胃出口阻塞,進行分流性胃十二指腸吻合術	不推薦	低
Q: 胰臟切除術是否有益於胰臟癌並且有手術中冰凍活檢病理證實主動脈旁淋巴結轉移的患者? R: 建議在患有胰臟癌並且有手術中冰凍活檢病理證實主動脈旁淋巴結轉移的患者,先暫停胰臟切除術。	無結論	非常低
Q: 肝切除術對伴有肝的寡轉移胰臟癌患者有益嗎? R: 建議對伴有肝的寡轉移胰臟癌患者,保留肝切除術	無結論	非常低
Q: 轉換手術對局部晚期胰腺癌(LAPC)是否有益? R: 在 LAPC 的情況下,可以考慮在誘導化療後進行轉換手術。	有條件地	低
Q: 胰十二指腸切除術(AFA-PD)中的動脈優先入路對胰頭癌患者是否有益? R: 不建議在胰頭癌病例中進行 AFA-PD。	無結論	非常低