

MEETING ABSTRACT

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Hepato-biliopancreatic surgery in the elderly

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Background

The HPB district tumour includes a high incidence between the 6th and the 8th decade of life.

ISTAT information from the 1st January 2009 confirm that people over the age of 65 represent 20.1% of the population.

In Calabria they represent 18,7% of the population, according to the national tendency.

Materials and methods

From November 2007 to October 2009,185 HPB patients from our Institute were observed and divided as follows: 39 for pancreatic tumours, 21for HCC;39 for neoplasm of the CBD, 41 for liver MTS; 45 for benign liver pathology.

Results

Operative mortality, disease – free survival and overall survival are very similar to the deducible information of the whole survey and they seem to be influenced by tactics and surgical technique.

As the elderly can present comorbidity, cognitive defects and less life expectancy, appropriate therapeutical options require a significant selection by the candidate for major resective surgery.

Conclusions

Our information indicates that seniority is not an aggravating risk in terms of outcome, not only by the significant patient selection but also by the surgeon experience and it doesn't condition major surgical options.

The HPB resective surgery, in selected elderly patients, can be done maintaining an acceptable morbidity and an appropriate survival level in terms of life.

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