

## Laparoscopic complete mesocolic excision for advanced colon cancer around the hepatic flexure

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**Purpose:** Complete mesocolic excision and central ligation for colonic cancer was proposed by W. Hohenberger in 2009. The technique of complete mesocolic excision is translated into lower local recurrence rates and better overall survival. He described that about 5% positive lymph nodes could be found over the head of the pancreas for the cancer around the hepatic flexure of the colon. We present laparoscopic complete mesocolic excision with radical lymphadenectomy for advanced colon cancer around the hepatic flexure via separation of the mesocolon into two layers as in filleting fish.

**Methods:** Between January to November 2011, 16 consecutive patients with advanced colon cancer around the hepatic flexure underwent a curative laparoscopic right hemicolectomy via a medial to lateral approach. The D3 lymphadenectomy procedure was performed first. The mesocolon was dissected between the superficial layer of the fat tissue and the deep layer of the vascular sheath along the superior mesenteric artery. The root of each supplying or draining vessel, such as the gastrocolic trunk, the ileocolic vessels, and the middle colic vessels was exposed, and then divided. After the omental bursa was exposed, the peripheral tissue of the right gastroepiploic vein is dissected from the right gastroepiploic artery to complete the radical lymphadenectomy. The lymph nodes between the right colic vein and the gastrocolic trunk over the head of the pancreas were completely removed. Next, the bowel was mobilized, and the specimen was retrieved through the small incision. Finally, extra-anastomosis was performed.

**Results:** There were no intra-operative complications. The median number of retrieved lymph nodes was 38 (range, 13-63). The median total surgical time was 205 (range, 160-312min). Surgical blood loss was slight (range, 1-20mL). The postoperative course was uneventful for all patients.

**Conclusions:** The described method is useful and feasible for radical lymphadenectomy during a laparoscopic complete mesocolic excision for colon cancer around the hepatic flexure.

### Biography

Dr. Uematsu graduated in Ooita medical university, Japan at the age of 25 years. He is the director of the department of colorectal surgery in Saku central hospital. He has performed more than 1000 laparoscopic surgeries for colorectal cancer. He has published 4 papers about the laparoscopic colorectal surgery in reputed journals.