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IS ROBOTIC PANCREATODUODENECTOMY FOR YOU? DEFYING THE STEEP LEARNING CURVE!

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Introduction: Pancreaticoduodenectomy (PD) is a challenging operation. Multiple studies have shown robotic PD (RPD) to be safe, with equivalent oncologic outcomes as compared to open PD (OPD). Our aim was to assess the translation of the safety profile of RPD and to determine the learning curve for RPD in a community setting.

Methods: A retrospective review of 67 consecutive patients who underwent PD from January 2014 to February 2015 was performed.

Results: Of the 67 PD, 55 (82%) underwent OPD and 12 (18%) RPD. Both groups were similar. There was a statistically significant difference in operative time (OT), OPD vs. RPD (OvR); (223 min vs. 337 min [p < 0.0001]), although the OT for RPD improved from 463 min (1st case) to 250 min in the last 3 cases. No statistical difference in blood loss (OvR; 435 mL vs. 335 mL [p > 0.67]), length of stay (OvR; 10.1 vs. 10.6 days [p > 0.61]) and R0 resection status (OvR; 36 vs 9 [p > 0.74]) was found. There was 1/55 (2%) mortality in the OPD group.

Conclusion: Our data reflects the experience (>500 PD's) of a single high volume (>50 PD's a year) community hospital based surgeon. Similar safety profile and outcomes were achieved compared to large academic centers. For experienced HPB surgeons learning is faster and OT can be reduced to half within 10 RPD cases.

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BIBLIOMETRIC ANALYSIS AS MESAURE OF LONG-TERM PERFORMANCE IN PANCREATIC CANCER RESEARCH

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Introduction: Research on pancreatic cancer consists in basic, translational and clinical research. Bibliometric indexes as IF and H-Index have been proposed as measures of quality and performance for medical research. Our goal was to analyze the IF and the 5-years H-Index of the publications about pancreatic cancer research.

Methods: A literature search was performed on PubMed from 2003 to 2013 including the first five journals with the highest Impact Factor from each of the following subject categories: Surgery, Oncology, Gastroenterology, Research and Experimental Medicine, General and Internal Medicine and Pathology. An overall number of 2774 publications were screened, and 358 original papers were included in the

analysis. 126 (35%) articles were published in clinical research, 105 (29%) in translational, and 127 (36%) in basic research.

Results: The average IF was 6.68 for clinical papers, 10.07 for translational, and 8.53 for basic research, respectively (p < 0.0001). IF significantly correlated with the department of affiliation and the geographic area (p < 0.0001 and < 0.0001, respectively). Translational research had lower chance than clinical and basic research to be published in low IF journals (OR: 0.105; 95% CI 0.035–0.313

p < 0.001). However, the difference in 5-years HI was not statistically significant.

Conclusion: Translational research may have better chance to publish in high IF journals. However long term performance might not be mainly influenced by the journal IF. Long-term performance may be affected by research findings that are reproducible, resolve gaps arise between theoretical expectation and results or changing current clinical practice.

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RITA HPB: FIRST MULTI-INSTITUTIONAL EXPERIENCE IN ARGENTINA

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Introduction: The HPB cancers are an heterogeneous group distinguished by high morbi-mortality, delayed diagnosis, management complexity, lack of effective treatments and cooperative works. Due to particularities of our country and sharpened regional variations observed in these tumors, local records become even more important, since national averages don't always reflect regional realities and extrapolation is not necessarily accurate.

Method: We apply the Institutional Tumor Registry of Argentina (RITA) for the first time to investigate Hepato-Pancreato-Biliary cancers by an observational, prospective, multi-institutional work. Patients with imaging and/or histological diagnosis of HBP cancer were recorded since June 1st, 2013 until May 31th, 2015 from six centers: Hospital of Gastroenterology Udaondo (HBU), CABA; Zenón Santillán's Hospital, Tucumán; Oncologic Foundation Rodríguez Alzola (FORA), Salta; Favaloro Foundation, CABA; San Juan Bautista's Hospital and Pasteur Clinic, Catamarca. The purpose is to know the frequency, social-demographic distribution, stage at presentation and overall survival.

Results: 487 patients were recorded: 293 (60%) from HBU, 88 (18%) Zenón Santillán, 44 (9%) FORA; 41 (8%) Favaloro; 12 (3%) Pasteur and 9 (2%) San Juan Bautista. Majority age range: 60–64 years-old. 258 (53%) men and 229 (47%) women. Stage (S) presented: S0, 1%; S1, 7%; SII, 15%; SIII, 26%; SIV, 42% and unknown, 9%. Performance Status (PS): PS0, 14.4%; PS1, 41.5%; PS2, 21.6%; PS3, 13.1%; PS4, 2.3% and unknown, 7.2%. Overall survival: 6.5 months.