Interventional and Therapeutic Gastrointestinal Endoscopy

Editors
Klaus Mönkemüller
C. Mel Wilcox
Miguel Muñoz-Navas

A valuable companion for daily practice

Selected Contents

Introduction: Mönkemüller, K. et al.
Periendoscopic Use of Anticoagulants and Antiplatlet Agents: Veitch, A.
Use of Antibiotics in Therapeutic Endoscopy: Mönkemüller, K. et al.
Accessories Used for Hemostasis in Gastrointestinal Endoscopy: Jovanović, L.; Milosavljević, T.
Endoscopic Therapy for Peptic Ulcer Bleeding: Peter, S.; Wilcox, C.M.
Endoscopic Therapy for Esophageal Varices: Cestari, R. et al.
Endoscopic Therapy for Gastric Varices: Mönkemüller, K.; Fry, L.C.
Portal Hypertensive Gastropathy: Cestari, R. et al.
Endoscopic Dilatation of Benign and Malignant Esophageal Stenoses: Mönkemüller, K. et al.
Self-Expanding Metallic Stents for the Palliation of Malignant Esophageal Obstruction: Mönkemüller, K.; Zimmermann, L.
Endoscopic Therapy of Zenker’s Diverticulum: Hondo, F.T. et al.
Endoscopic Ablation of Barrett’s Esophagus Using Argon Plasma Coagulation: Pereire-Lima, J.C.; Lopes, C.V.
Photodynamic Therapy for Barrett’s Esophagus: Panjehpour, M.; Overholt, B.F.
Endoscopic Ablation of Barrett’s Esophagus Using the HALO® System: Fleischer, D.E.; Sharma, V.K.
Endoscopic Resection for Early Cancers of the Esophagus and Stomach: Manner, H. et al.

Pyloric Dilation: Carretero, C.; Muñoz-Navas, M.
Stents for Postoperative Upper Gastrointestinal Leaks: Schubert, D.
Percutaneous Endoscopic Gastrostomy: López Rosés, L.; Castro Ortiz, E.
Direct Percutaneous Endoscopic Jejunostomy: Baron, T.H.
Therapeutic Small Bowel Endoscopy: Mensink, P.B.F.; Aktas, H.
Middle Gastrointestinal Endoscopy: Mönkemüller, K. et al.
Endoscopic Therapy for Lower Gastrointestinal Bleeding: Jovanović, L.; Milosavljević, T.
Principles and Techniques of Colon Polypectomy: Mönkemüller, K. et al.
Endoscopic Mucosal Resection for Colorectal Tumors: Yamamoto, H.
Colon Stents for Malignant Colonic Obstruction: Štimac, D.
Endoscopic Management of Benign Colonic Obstruction: Shores, N.J.; Baillie, J.
Endoscopic Therapy for Chronic Pancreatitis: Chennat, J.; Waxman, I.
Endoscopic Management of Biliary Leaks: Schubert, D.
Endoscopic Management of Biliary Complications after Liver Transplantation: Yamamoto, H.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Management of Benign Biliary Obstruction: Chaves, D.M.
Stents for Benign and Malignant Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Endoscopic Treatment of Biliary Complications after Liver Transplantation: Spicak, J.
Endoscopic Management of Biliary Complications after Liver Transplantation: Spicak, J.
Percutonal Cholangiography: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Endoscopic Ultrasonographic Drainage of Pancreatic Fluid Collections: Subtil Iñigo, J.C.; Muñoz-Navas, M.
Endoscopic Management of Benign Biliary Stenoses: Karpe, M.A.; Al-Haddad, M.
Endoscopic Therapy and Treatment of Benign Biliary Tract Diseases: Pereira-Lima, J.C.; Lopes, C.V.
Endoscopic Management of Bile Leaks: Chavarria, J.; Waxman, I.
Percutaneous Endoscopic Gastrostomy: Weersma, R.K.
Endoscopic Papillectomy: Boix, J. et al.
Photodynamic Therapy: Palliation and Endoscopic Technique in Cholangiocellular Carcinoma: Ibrahim, T.; Kahaleh, M.
ERCP in Patients with Altered Upper Gastrointestinal Tract Anatomy: Koornstra, J.J.
Techniques for Minor Papilla Access and Endoscopic Therapy: Gan, S.I.; Kozarek, R.A.
Endoscopic Therapy for Chronic Pancreatitis: Cahan, D.L. et al.
Endoscopic Management of Pancreatic Fluid Collections: Baron, T.H.
Submission
Manuscripts written in English are considered and should be submitted online at www.karger.com/dsu

Should you experience problems with your submission, please contact dsu@karger.ch

Conditions
All manuscripts are subject to editorial review. Manuscripts are received with the explicit understanding that they are not under simultaneous consideration by any other publication. Submission of an article for publication implies transfer of the copyright from the author to the publisher upon acceptance. Accepted papers become the permanent property of 'Digestive Surgery' and may not be reproduced by any means, in whole or in part, without the written consent of the publisher. The form 'Submission Essentials' must be submitted along with the manuscript. It is available at www.karger.com/dsu_submission_essentials.

Types of Articles
It is the author's responsibility to obtain permission to reproduce illustrations, table, etc. from other publications. The journal consists of the following sections: 1. Editorials - 1,000 words (max. 10 refs) 2. Review Articles - 5,000 words (max. 150 refs) 3. Original Papers - 2,700 words 4. How I Do It - 2,000 words 5. Historical Reviews - 2,000 words 6. Announcements

The Case Reports Clinical Images and Short Reports have section been discontinued.

How I Do It
'Digestive Surgery' is publishing articles which describe modern operative techniques in the field of Gastrointestinal Surgery. The manuscript should be short and precise (maximum 10 typewritten double-spaced pages) and should contain 1-4 videos (max. 250MB) to explain the surgical procedure. Decisions of submitted papers within 6 weeks. A decision will be reached within 6 weeks for manuscripts submitted to the 'How I Do It' section.

Conflicts of Interest
Authors are required to disclose any sponsorship or funding arrangements relating to their research and all authors should disclose any possible conflicts of interest. Conflict of interest statements will be published at the end of the article.

Ethics
Published research must comply with the guidelines for human studies and animal welfare regulations. Authors should state that subjects have given their informed consent and that the study protocol has been approved by the institute's committee on human research. Further, they should also state that animal experiments conform to institutional standards.

Statistics
Authors must conform to these guidelines or any work submitted to Digestive Surgery will be returned without review. The advice of a statistician is required for any analysis beyond simple data description or comparisons and must be mentioned in the Methods. All data should be described in the text and in tables or figures, median and (inter)quartile range. 95% CI range. The use of parametric descriptors including mean, SEM and SD must not be used unless clearly justified in the text. Analysis of simple comparisons should also be undertaken using non-parametric methods, including the χ², Fisher's Exact Probability and Spearman's Rank Correlation tests for categorical data and the Rank-Sum and Mann-Whitney U tests for continuous data. All analyses should be two-sided ‘p’ unless justified in the ‘Methods’.

Guidelines for Authors

Arrangement
Title page: The first page of each paper should indicate the title, the authors’ names (max. number of authors: 6), the institute where the work was conducted, and a short title for use as running head.

Full address: The exact postal address of the corresponding author complete with postal code must be given at the bottom of the title page. Please also supply phone and fax numbers, as well as e-mail address.

Key words: Please supply 3–10 key words in English that reflect the content of the paper.

Abstract: Each paper needs an abstract of up to 200 words. Original papers need an abstract structured as follows: Background/Aims: What is the major problem that prompted the study? Methods: How was the study performed? Results: Most important findings? Conclusion: Most important conclusion?

Acknowledgements: Financial support for the study and any conflicts of interest must be stated in the Acknowledgements.

Footnotes: Avoid footnotes.

Abbreviations: All non-essential abbreviations should be removed and replaced by the full term.

Tables and illustrations: Tables and illustrations (both numbered in Arabic numerals) should be prepared on separate pages. Tables require a heading and figures a legend, also preferred separately and named clearly. Acceptable files and formats are: Word or PDF files, Excel spreadsheets (only if the data can be converted properly to a PDF file), and video files (.mov, .avi, .mpeg).

Supplementary Material
Supplementary material is restricted to additional data that are not necessary for the scientific integrity and conclusions of the paper. Please note that all supplementary files will undergo editorial review and should be submitted together with the original manuscript. The Editors reserve the right to limit the scope and length of the supplementary material. Supplementary material must meet production quality standards for Web publication without the need for any modification or editing. In general, supplementary files should not exceed 10 MB in size. All figures and tables should have titles and legends and all files should be supplied separately and named clearly. Acceptable files and formats are: Word or PDF files, Excel spreadsheets (only if the data can be converted properly to a PDF file), and video files (.mov, .avi, .mpeg).

Author's Choice
With this option the author can choose to make his article freely available online against a one-time fee of CHF 3000.–. This fee is independent of any standard charges for supplementary papers, color images etc. which the authors will agree to pay. More information can be found at www.karger.com/authors_choice.

Page Charges
Original Papers exceeding the first 3 printed pages which are free will cost CHF 325.– per extra page.

Electronic Proofs
Unless indicated otherwise, proofs will be e-mailed to the corresponding author.

Reprints
Order forms and a price list are sent with the proofs. Orders submitted after the issue is printed are subject to considerably higher prices.
Publication Data: ‘Digestive Surgery’ is published 6 times a year. Volume 29 with 6 issues appears in 2012.

Copyright: © 2012 S. Karger AG, Basel (Switzerland). All rights reserved. No part of this publication may be translated into other languages, reproduced or utilized in any form or by any means, electronic or mechanical, including photocopying, recording, microcopying, or by any information storage and retrieval system, without permission in writing from the publisher or, in the case of photocopying, direct payment of a specified fee to the Copyright Clearance Center.

Disclaimer: The statements, opinions and data contained in this publication are solely those of the individual authors and contributors and not of the publisher and the editor(s). The appearance of advertisements in the journal is not a warranty, endorsement, or approval of the products or services advertised or of their effectiveness, quality or safety. The publisher and the editor(s) disclaim responsibility for any injury to persons or property resulting from any ideas, methods, instructions or products referred to in the content or advertisements.

Subscription Rates: Subscriptions run for a full calendar year. Prices are given per year.

Personal subscription:
- Print or Online
  - CHF 353.–
  - EUR 283.–
  - USD 343.00
  - Postage and handling (added to print and print+online)
  - CHF 40.80 Europe, CHF 60.– Overseas
  - EUR 31.20
  - USD 56.40

Institutional subscription:
- Print or Online
  - CHF 2437.–
  - EUR 1950.–
  - USD 2366.00
- Postage and handling (added to print and print+online)
  - CHF 51.– Europe, CHF 75.– Overseas
  - EUR 39.–
  - USD 70.50

Airmail surcharge: CHF 51.– / USD 48.00

Discount subscription prices:
Please enquire about reduced rates for members of affiliated societies.

Back Volumes and Single Issues: Information on availability and prices of single print issues and print or electronic back volumes can be obtained from Customer Service at service@karger.ch.

Bibliographic Indices: This journal is regularly listed in bibliographic services, including Current Contents® and PubMed/MEDLINE.

Photocopying: This journal has been registered with the Copyright Clearance Center (CCC), as indicated by the code appearing on the first page of each article. For readers in the US, this code signals consent for copying of articles for personal or internal use, or for the personal or internal use of specific clients, provided that the stated fee is paid per copy directly to Copyright Clearance Center Inc.

222 Rosewood Drive
Danvers, MA 01923 (USA)

A copy of the first page of the article must accompany payment. Consent does not extend to copying for general distribution, for promotion, for creating new works, or for resale. In these cases, specific written permission must be obtained from the copyright owner, S. Karger AG, P.O. Box CH–4009 Basel (Switzerland).
Ascites is the most frequent and hepatorenal syndrome. In the past, the most lethal complication in liver cirrhosis has been regarded as the progress of treatment of these complications, thus reducing mortality in patients. This publication highlights and critically appraises recent achievements and novel advances, and at the same time provides the background needed to grasp novel concepts. Topics treated include complications of paracentesis, the right choice of plasma expanders, and selection of patients who will experience survival benefit from transjugular intra-hepatic portosystemic shunt. Hepatorenal syndrome, on the other hand, is responsible for a broad spectrum of manifestations caused by acute kidney injury, which until recently was considered a lethal condition. Drug treatments to improve renal function and prolong survival are therefore also discussed, including important issues for clinical outcome which are still under debate. Moreover, the role of combined kidney-liver transplantation versus conventional liver-only transplantation is addressed, as well as the use of vaptans in hyponatremia and their controversial role in the treatment of ascites.

Renowned experts share their knowledge and expertise and provide an international perspective. Their contributions include up-to-date references and a bullet-point summary, making this publication most valuable for practitioners, clinicians and scientists in the field.

Contents

Preface: Gerbes, A.L.

Differential Diagnosis of ascites: Appenrodt, B.

Current Treatment Strategies: Diuretics: Bernardi, M.

Paracentesis: Sanyal, A.J.; Bajaj, J.S.; Shaw, J.

Large-Volume Paracentesis: Which Plasma Expander? Terg, R.A.

Albumin: Not Just a Plasma Expander: Davies, N.A.; Garcia, R.; Proven, A.; Jalan, R.

Transjugular Intrahepatic Portosystemic Shunt for Ascites: Which Patients Will Benefit? Salerno, F.; Cazzaniga, M.

Spontaneous Bacterial Peritonitis – Prophylaxis and Treatment: Wiest, R.; Garcia-Tsao, G.

Clinical Implications of hyponatremia in cirrhosis: Heuman, D.M.

Vaptans for ascites – Chances and Risks: Wong, F.


Renal failure in cirrhosis: Gustot, T.; Moreau, R.

Novel definition of hepatorenal syndrome: clinical consequences: Fernandez, J.; Arroyo, V.

Role of infections in hepatorenal syndrome: Wiest, R.

TIPS for HRS: Sauerbruch, T.; Appenrodt, B.

Vasoconstrictor Therapy for Hepatorenal Syndrome: Yeo, C.-M.; Garcia-Tsao, G.


Terlipressin for hepatorenal syndrome: Predictors of response: Cardenas, A.; Gines, P.

Safety of terlipressin for hepatorenal syndrome: Krag, A.; Moller, S.

Terlipressin for hepatorenal syndrome: Novel strategies and future perspectives: Angeli, P.

Hepatorenal syndrome and liver transplantation: Gonwa, T.A.
Contents

See the journal website for contents
Advanced Liver Resection

Editors
T.M. van Gulik
J. Schmidt

Contents

Editorial
Advanced Liver Resection: van Gulik, T.M.; Schmidt, J.

Hepatic Resection with in situ Hypothermic Perfusion Is Superior to Other Resection Techniques: Hoti, E.; Salloum, C.; Azoulay, D.


From Mesohepatectomy to Mini-Mesohepatectomy: Evolving the Concept of Resectability of Hepatic Tumors at the Hepatocaval Confluence: Donadon, M.; Torzilli, G.


Two-Stage Hepatectomy Procedure to Treat Initially Unresectable Multiple Bilobar Colorectal Liver Metastases: Technical Aspects: Narita, M.; Oussoultzoglou, E.; Bachellier, P.; Ross, E.; Pessaux, P.; Jaeck, D.


Laparoscopic Liver Resection for Hepatocellular Carcinoma in Cirrhosis: Long-Term Outcomes: Belli, G.; Fantini, C.; Belli, A.; Limongelli, P.


www.karger.com/dsu
A topical review

Liver and Immunology

Editors
H.J. Schlitt
V. Benseler
C. Hellerbrand
M. Loss
T.S. Weiss
R. Wiest

Contents

From Inflammation to Fibrosis
Modulation of Liver Fibrosis by Adipokines:
Marra, F.; Navari, N.; Vivoli, E.; Galastri, S.; Provenzano, A.
Obesity and Fatty Liver Are ‘Grease’ for the Machinery of Hepatic Fibrosis:
Bosscherhoff, A.; Hellerbrand, C.

Transplantation and Regeneration
Mechanisms Balancing Tolerance and Immunity in the Liver: Böttcher, J.P.; Knolle, P.A.; Stabenow, D.

Autoimmune Liver Disease
Role of the Hepatic Parenchyma in Liver Transplant Tolerance: A Paradigm Revisited: Benseler, V.; Tay, S.S.; Bowen, D.G.; Bertolino, P.
Requirements and Challenges of a Preclinical Autoimmune Hepatitis Mouse Model: Hardtke-Wolenski, M.; Noyan, F.; Jaeckel, E.
Therapeutic Strategies for Autoimmune Hepatitis: Manns, M.P.; Strassburg, C.P.

Viral Hepatitis
Success and Failure of Virus-Specific T Cell Responses in Hepatitis C Virus Infection: Neumann-Haefelin, C.; Thimme, R.
Immune Control of Hepatitis B Virus: Bauer, T.; Spring, M.; Prozter, U.

Please send: ___ copy/ies
Postage and handling free with prepaid payment

Payment:
Please charge to my credit card
☐ American Express  ☐ Diners  ☐ Eurocard
☐ MasterCard  ☐ Visa

Card No.: ____________  Exp. date: ____________

CVV/CVC
(3 digits in the signature field on the back of Visa and MasterCard)
☐ Check enclosed  ☐ Please bill me

Orders may be placed with any bookshop, subscription agency, directly with the publisher or through a Karger distributor.

S. Karger AG, P.O. Box, CH–4009 Basel (Switzerland)
E-Mail orders@karger.ch, www.karger.com

Name/Address: ____________________________
______________________________________
______________________________________
______________________________________
Fax: +41 61 306 12 34

Karger
Medical and Scientific Publishers
Digestive Surgery presents a comprehensive overview in the field of abdominal surgery. Interdisciplinary in scope, the journal keeps the specialist aware of advances in all fields that contribute to improvements in the diagnosis and treatment of gastrointestinal disease. Particular emphasis is given to articles that evaluate not only recent clinical developments, especially clinical trials and technical innovations such as new endoscopic and laparoscopic procedures, but also relevant translational research. Each contribution is carefully aligned with the need of the digestive surgeon. Thus, the journal is an important component of the continuing medical education of surgeons who want their practice to benefit from a familiarity with new knowledge in all its dimensions.

Selected contributions
Initial Experience in Laparoscopic Single-Port Appendectomy: A Pilot Study: Raakow, R.; Jacob, D.A. (Berlin)
Focal Nodular Hyperplasia and Hepatic Adenoma: Epidemiology and Pathology: Maillette de Buy Wenniger, L.; Terpstra, V.; Beuers, U. (Amsterdam)
Perforated Peptic Ulcer Disease: A Review of History and Treatment: Bertleff, M.J.O.E. (Maastricht); Lange, J.F. (Rotterdam)
Temporary End Ileostomy with Subcutaneously Buried Efferent Limb: Results and Potential Advantages: van der Sluis, F.F.J.; Schouten, N.; de Graaf, P.W.; Karsten, T.M. (Delft); Stassen, L.P. (Delft/Maastricht)

More information at www.Digestive-Surgery.com
- Pay-per-view and Subscriber Access to Full Text
- Full Table of Contents
- Full Editorial Board
- Free Abstracts and Selected Articles
- Online Sample Issue
- Submission/Guidelines for Authors
- Subscription Details
- Free Alert Service
- Online Library Recommendation

Digestive Surgery
2012: Volume 29
6 issues per volume
Language: English
ISSN 0253–4886 (print)
ISSN 1421–9883 (online)
Listed in bibliographic services, including Current Contents®, MEDLINE, Biological Abstracts, EMBASE/Excerpta Medica

KF12033
Techniques of Liver Resection

Owing to both improved preoperative assessment and the use of established surgical techniques, liver resection can today be performed with low morbidity and minimal mortality. But no matter which technique is applied in liver resection, the most difficult event to manage is postsectional liver failure. All peri-operative efforts should therefore be directed to the prevention of this potentially lethal complication.

This publication presents some of the current techniques of liver resection and the management of the most common complications associated with the procedures. The first part deals with the question of how much remnant liver is enough for a safe resection and describes appropriate techniques for optimal preservation. Then, several procedures for transection of the liver parenchyma and for clamping of the afferent vessels at the hepatic pedicle are presented, mainly aiming at limiting blood loss during resection. Bile leakage and its prevention after liver resection are considered last, followed by a discussion of indications for laparoscopic liver resection.