

## PORTAL VEIN RECONSTRUCTION USING AUTOLOGOUS GRAFTS IN PANCREATODUODENECTOMY

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**Background** : Portal vein/superior mesenteric vein (PV/SMV) resection and reconstruction in pancreaticoduodenectomy (PD) or total pancreatectomy (TP) is one of the most complex surgeries in the digestive system. Each technique for portal vein reconstruction has its own advantages and disadvantages, making the optimal approach still a matter of debate.

**Methods** : From October 2020 to October 2024, patients with pancreatic cancer who underwent PD or TP with PV/SMV resection and reconstruction using autologous grafts were recorded. The data collected included basic information, clinical characteristics, surgical details, and post-operative graft conditions.

**Results** : During the study period, 10 cases of vein reconstruction using autologous grafts (falciform ligament/peritoneum, or an alternative vein) were performed. No cases of the early and late graft thrombosis or stenosis rate were reported.

**Conclusions** : PV/SMV reconstruction using autologous grafts in PD is feasible and enhances the possibility of achieving radical surgery in cases of locally invasive duodenal-pancreatic head cancer.

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