

## The accuracy of the multi-slice detector CT-scan (MDCT) in staging borderline respectable periampullary pancreatic carcinoma

**Maram Darwish\***

*MRCs, University Hospital of Wales, UK*

**Khaled Noureldin**

*MRCs, Southend University Hospital, UK*

**Rasmieh Al-Amer**

*PhD, Isra University, Jordan*

Statement of the Problem: Periampullary malignancies are highly aggressive with poor outcomes. Surgery is the only curative option. It is crucial to define the patients who can advantage from a Whipple's resection and who can avoid. The purpose of this study is to assess MDCT accuracy in staging cancers periampullary cancers. Methodology & Theoretical Orientation: An RCT investigated randomly 28 patients over 15 months. The patients were sub-divided into 2 groups. Group A, we relied mainly on the MDCT for preoperative staging, while in Group B staging laparoscopy was added before the abdominal exploration. Findings: The sensitivity of the MDCT and its accuracy were 100% in defining the signs of irresistibility. For borderline staging, the accuracy of the scan was 62.5% and 71%, in groups A and B. The overall accuracy of MDCT was 75%. It decreased to 68.1% for boarder line cases. The addition of staging laparoscopy to the diagnostic work up, increased the accuracy to 92.5%. -The camera test was able to see occult findings which were missed in the images. liver Mets and malignant peritoneal fluid were localized in 18% and 9% respectively. Also, three cases in A and one in B underwent unnecessary laparotomy. The false negative incidences were 21% and 7% in group A and B, with overall incidence 14.2%. Conclusion & Significance: MDCT is highly sensitive and specific with high stage periampullary cancers. These parameters drop in potentially resectable tumors. This due to low accuracy in detecting the degree of vascular abutment and missing occult findings. We advise the addition of other adjuncts to decrease the rate of un-indicated laparotomy, such as diagnostic laparoscopy and laparoscopic ultrasonography.

### Biography

M. Darwish is an aspiring humanitarian surgeon, finished her Surgical training in Jordan, and worked for Medicines Sans Frontiers (MSF) for more than a year, where she managed to gain new skills and improved her expertise in managing patients with severe war related injuries. She then joined a dynamic surgical team at Imperial College Healthcare Trust, where she gained knowledge and new advances in surgery. Currently she is based in Cardiff working in the general and vascular surgery department as a senior clinical fellow.

Maram.darwish@wales.nhs.uk