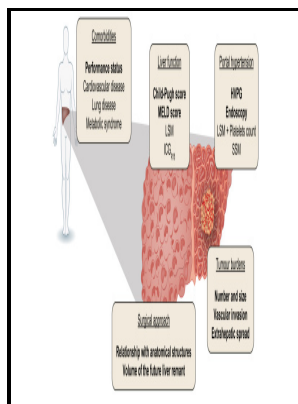


# Modern operative techniques in liver surgery

Churchill Livingstone - Multidisciplinary Symposium — Liver Metastases



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Surgery, Operative -- methods.  
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## Intraoperative 3D Hologram Support With Mixed Reality Techniques in Liver Surgery

Tumours involving all of the major hepatic veins with or without IVC invasion, and particularly tumours involving the hepatocaval confluence and needing IVC replacement, continue to pose a surgical challenge. At present, there is no single test that will reliably predict postoperative liver failure, and the assessment is made based on laboratory and radiological investigations, quantitative tests, and surgical judgement. Tomlinson JS, Jarnagin WR, DeMatteo RP, Fong Y, Kornprat P, Gonen M, Kemeny N, Brennan MF, Blumgart LH, D'Angelica M: Actual 10-year survival after resection of colorectal liver metastases defines cure.

## Intraoperative 3D Hologram Support With Mixed Reality Techniques in Liver Surgery

Hepato-biliopancreatic surgeons, hepatologists, radiologists, clinicians and researchers who are interested in liver surgery will find this book an invaluable guide. To view a copy of this licence, visit. In a CT follow-up study of the growth rate of colorectal liver metastases, Finlay et al.

## Operative Techniques in Liver Resection

Preoperative and perioperative interventions should be considered to minimize the additional damage.

## Comprehensive application of modern technologies in precise liver resection

Liver tumors can also be addressed using minimally invasive, catheter-based procedures and treatments. Associated Clinical Conditions Patients with nonalcoholic fatty liver disease have an increased prevalence of non-insulin-dependent diabetes, but the actual role of diabetes in postoperative recovery is unclear as studies report contradictory results.

## Operative Techniques in Liver Resection

There was no significant difference between the two groups in terms of blood loss during transection, time of hemostasis and number of sutures for hemostasis on POD 0, morbidity rate, as well as the histopathological examination on POD 7. Those patients with underlying chronic liver disease presenting for liver resection are at high risk of postoperative liver failure and merit more detailed assessment of hepatic function. Patients with hepatic carcinoid present a particular challenge but the safety of these resections has been greatly improved with the use of octreotide.

## **Multidisciplinary Symposium—Liver Metastases**

Ratzu V, Charlotte F, Heurtier A, Gombert S, Giral P, Bruckert E, Grimaldi A, Capron F, Poynard T: Sampling variability of liver biopsy in nonalcoholic fatty liver disease.

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