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Comparison of efficacy of two surgical resection methods for hilar cholangiocarcinoma: A systematic review

Xiao-zhen Li¹, Wen-ting Cao¹, Wan-ting Xia¹, Hai-rong Huang¹, Tai-cheng Wang²

Objective: To systematically analyze the prognosis of limited hilar hepatectomy versus combined liver lobectomy in the treatment of hilar cholangiocarcinoma.

Methods: We searched CBM, CNKI, VIP, Wangfang, PubMed, SCI, Elsevier clinicalkey and OVID, and the cut-off time of searching was 31 April, 2019. Two researchers evaluated the risk of bias of the included studies independently according to the Newcastle-Ottawa Scale (NOS), and extracted data. RevMan 5.3 software was used for meta-analysis.

Results: A total of 12 cohort studies involving 1 288 patients were included, of which 426 patients were in the limited hilar hepatectomy group and 862 patients in the combined liver lobectomy group. Meta-analysis showed that there were statistically significant difference in radical resection rate and postoperative complication rate (RR=0.55, 95%*CI* 0.40 to 0.74, *P*<0.001; RR=0.63, 95%*CI* 0.49 to 0.81, *P*<0.001) between the hilar limited hepatectomy group and the combined liver lobectomy group; significant differences were found in 1-, 2- and 3-year survival rates (RR=0.75, 95%*CI* 0.67 to 0.84, *P*<0.001; RR=0.55, 95%*CI* 0.42 to 0.74, *P*<0.001; RR=0.54, 95%*CI* 0.39 to 0.75, *P*<0.001) between the two groups.

Conclusions: Comparing with the limited hilar hepatectomy, the radical resection rate of combined liver lobectomy was higher, and the 1-, 2- and 3-year survival rates were improved, but the complications was increased in treatment of hilar cholangiocarcinoma.

Keywords: Hilar Cholangiocarcinoma; Liver resection; Radical rate; Survival rates

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E-mail: wangtaicheng2008@163.com

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¹School of Public health, Hainan Medical University, Haikou 571199, China

²Department of hepatobiliary surgery, the Second Affiliated Hospital of Hainan Medical University, Haikou 570100, China

[™]Corresponding author: Tai-cheng Wang, Department of Hepatobiliary Surgery, the Second Affiliated Hospital of Hainan Medical University, Haikou 570100, China.