

## Sugarbaker procedure for Pseudomyxoma Peritonei

A. H. Mirnezami · B. J. Moran · T. D. Cecil

Published online: 19 August 2009  
© Springer-Verlag 2009

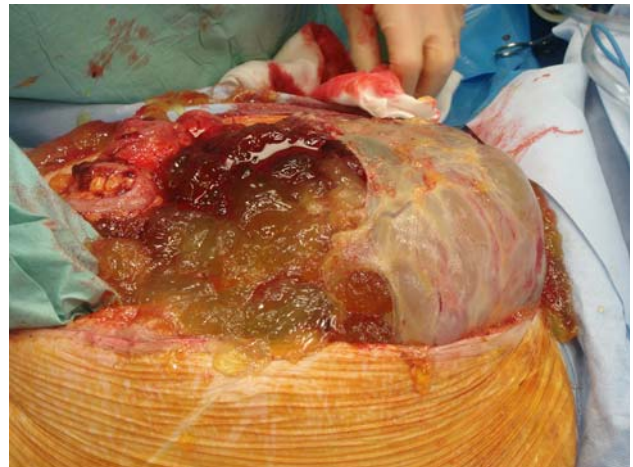
Pseudomyxoma Peritonei (PMP) is an uncommon condition characterised by diffuse mucinous ascites or “jelly belly”, and multifocal peritoneal implants. PMP commonly arises from an occult epithelial malignancy of the appendix. Surgical treatment involves a series of peritonectomy procedures and visceral resections to achieve macroscopic tumour clearance followed by heated intraperitoneal chemotherapy as described by Sugarbaker (Figs. 1, 2, 3, 4, 5, 6, 7, 8, 9).



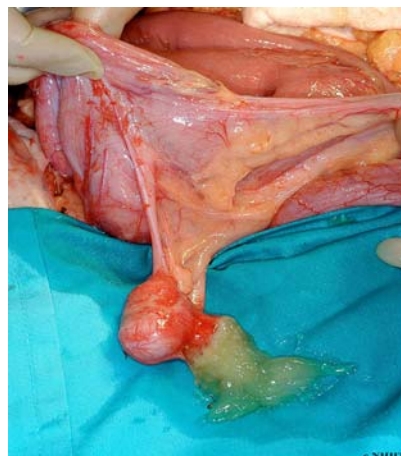
**Fig. 1** Preoperative cross-sectional imaging showing diffuse intra-peritoneal involvement with mucinous ascites

A. H. Mirnezami (✉)  
University Surgical Unit, Southampton General Hospital,  
Tremona road, Southampton SO16 6YD, UK  
e-mail: A.H.Mirnezami@soton.ac.uk

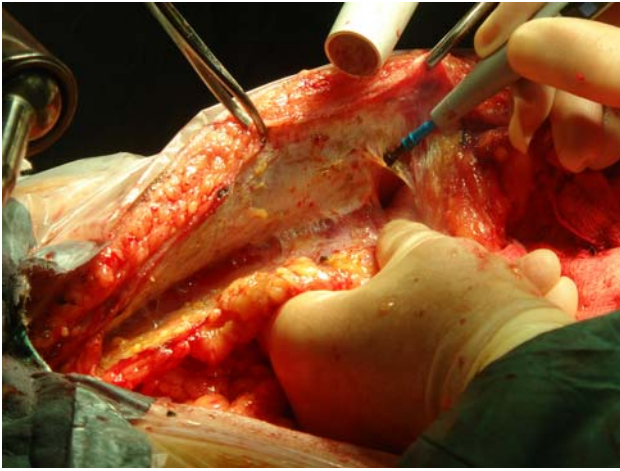
B. J. Moran · T. D. Cecil  
National Pseudomyxoma Peritonei Centre, Basingstoke  
and North Hampshire Hospital, Basingstoke RG24 9NA, UK  
e-mail: brendan.moran@nht.nhs.uk



**Fig. 2** Immediate findings at laparotomy showing “jelly belly” appearances



**Fig. 3** Perforated primary appendiceal tumour



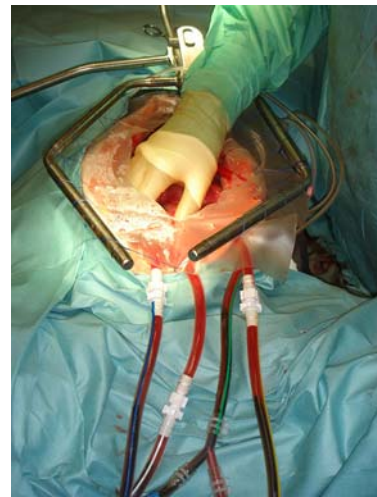
**Fig. 4** Right parietal peritonectomy



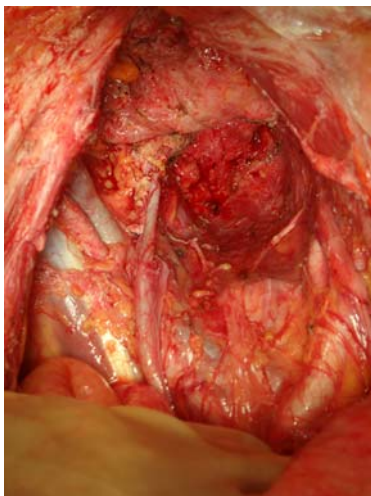
**Fig. 7** Liver capsulectomy with high power diathermy, and cholecystectomy



**Fig. 5** Stomach reflected upwards after greater and lesser omentectomy and splenectomy with left gastric artery preserved



**Fig. 8** Heated intraoperative peritoneal chemotherapy with mitomycin C at 41°C by coliseum technique



**Fig. 6** Pelvic peritonectomy and anterior resection with bladder stripped of peritoneum and retracted forward



**Fig. 9** Flat abdomen following complete cytoreduction with tube drains for postoperative intraperitoneal chemotherapy with 5-fluorouracil