

A Simple and Reliable Method for Intracorporeal Circular-Stapled Esophagojejunostomy Using a Hand-Sewn Over-and-Over Suture Technique in Laparoscopic Total Gastrectomy

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ABSTRACT

Background. The controversy regarding laparoscopic total gastrectomy (LTG) is mainly due to the difficulty associated with esophagojejunostomy during this procedure. Although several techniques have so far been reported to overcome this issue,^{1–4} a reliable technique has not yet been established. We developed intracorporeal esophagojejunostomy using a circular stapler in LTG with a hand-sewn over-and-over suture technique, and have shown its favorable outcomes compared with those of conventional open surgery.⁵ This technique is presented in the video.

Methods. After transection of the esophagus, an over-and-over suture with a 2-0 monofilament is placed counterclockwise from the right to the left side of the cut end in an outside-to-inside direction, and then from the left to the right side in an inside-to-outside direction. After insertion of the anvil head into the esophagus, it was fixed by ligation of the thread. Finally, intracorporeal esophagojejunal anastomosis was performed using a circular stapler.

Results. In LTG, reconstruction using this method was performed for 23 consecutive patients with gastric cancer. There were no serious intraoperative complications or need for conversion to open surgery. Anastomotic leakage and stenosis occurred in one case each, respectively. The mean

time for fixation of the anvil to the esophagus was 15 min for the last 12 consecutive patients.

Conclusions. This method is simple and feasible, and the advantage of this technique is the elimination of the backhand stroke throughout the suturing procedure.

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