A Robotic Pancreatic Resection機械臂胰腺癌切除術

Today, pancreatic resection is commonly done through a large abdominal incision. Keyhole surgery (minimally invasive surgery) for pancreatic resection faced many difficulties in the past because of the organ's complexity, but the development of the robotic surgical system over a decade ago has overcome many of these difficulties, allowing surgeons to operate from different orientations during a complex surgery. With the assistance of three-dimensional imaging and reticular robotic instruments, surgeons can now examine the abdomen more effectively and resect pancreatic tissues in difficult-to-reach areas with greater ease. This helps to avoid injuring any of the surrounding major vessels and speeds up post-operative recovery.

For most patients, robotic pancreatic resection has the following advantages:

- + Faster recovery and shorter hospital stays
- + Smaller wound without injury to muscles and fascias
- + Less pain and lower chance of infection
- + Less delay between surgery and subsequent chemotherapy and electrotherapy
- + Less laparotomy-related, long-term complications resulting, such as hernia, adhesion and blockage of intestines.



現時,胰腺切除術主流是以剖腹方式處理。過去,由於器官結構複雜,故微創切除胰腺面對不少困難。隨着機械臂系統於近十年間持續發展,不少難題都迎刃而解。外科醫生能以微創形式,從不同的角度在腔內進行複雜的手術。得到立體影像和機械臂系統輔助,可清晰了解腔內情況,方便剝離习鑽位置或角度的組織,同時避免傷及附近的主要血管,病人亦可較快復元。

對大部份患者而言,機械臂胰腺癌切除術有以下優點:

- + 康復較快,住院時間較短
- + 傷口較小,避免傷及肌肉與筋膜
- + 疼痛減少,感染機率較低
- + 避免延誤隨後的化療和電療
- + 減低因剖腹手術導致的長遠併發症,如切口疝、小腸氣、腸 黏連、腸塞等





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Robotic Pancreatic Resection 機械臂胰臟癌切除術





→ da Vinci Robotic Surgery

達文西機械臂手術

As part of its mission to serve the community with the most advanced medical equipment and technology available, Hong Kong Adventist Hospital – Stubbs Road launched the da Vinci Si HD robotic surgical system, and was the first hospital in Hong Kong to introduce this platform.

香港港安醫院一司徒拔道現已引進全港第一台達文西機械臂 Si高清手術輔助系統,期以最先進的儀器及技術來服務大家。

Advantages 優點

- + High-resolution three-dimensional images
- + Surgical instruments translate surgeon's wrist movements precisely, and provide greater flexibility and broader range of motion
- + The system's tremor reduction feature increases the precision of surgical movements
- + Range of minimally invasive surgeries is expanded, and the effectiveness and safety of surgery is increased
- + 高解像度的立體 (3D) 影像。
- + 仿真手腕手術器械,操控更靈活,活動範圍更廣。
- + 手術動作經除顫和調控,更加精細



A Pancreatic Cancer 胰臟癌

Pancreatic cancer is the sixth leading cause of death in Hong Kong among all types of cancer. Due to its slow development, inconspicuous position and the absence of symptoms, patients are often diagnosed at a late stage of disease.

胰臟癌是香港第六大癌症殺手。它生長緩慢而且深藏腹腔,加 上早期接近沒有任何症狀,多數患者在確診時都已屬晚期。

Risk Factors 風險因素

- + Family history of pancreatic cancer
- + Aged 60 or above
- + Diabetes
- + Smoking
- + Chronic pancreatitis
- + Benign conditions like mucinous cystic neoplasm that may have malignant potential
- + 家族病史
- + 六十歲或以上
- + 糖尿病
- + 長期吸煙
- + 胰臟長期發炎
- + 良性腫瘤如黏液性胰臟囊狀腫瘤,有機會惡化成癌腫瘤

Symptoms 症狀

In early stages, pancreatic cancer may remain symptomless. Symptoms that may emerge at a later stage include:

- + Loss of weight and appetite
- + Pain in the upper abdomen
- + Nausea and vomiting
- + Jaundice
- + Abdominal effusion

Please consult your doctor once any of the above conditions occur.

早期胰臟癌未必有徵狀,明顯病徵往往到了晚期才會出現其中包括:

- + 體重下降和食慾不振
- + 上腹疼痛
- + 嘔心和嘔吐
- + 黃膽,皮膚和眼睛發黃
- + 腹部積水

如發現上述任何徵狀,應該盡快求醫。



Examination and Diagnosis 檢查和確診

Pancreatic cancer can be checked by computed tomography (CT), magnetic resonance imaging (MRI), ultrasonic scan, and endoscopic retrograde cholangiopancreatography.

如有懷疑,可通過電腦掃描、磁力共振掃描、超聲波掃描、 膽管鏡及內視鏡逆行胰膽管造影術確診。



Treatment 治療

Treatment of pancreatic cancer depends on the cancer and condition of the patient. The only curative treatment for pancreatic cancer is surgical resection. If surgery is not feasible, other alternative treatments include chemotherapy, radiotherapy or a combination of these methods.

其治療視乎患者的狀況採用不同方法。外科手術是唯一可望根治的方法,如不能接受手術,替代治療包括化學治療、放射治療、標靶治療,或混合幾種方法一併使用。





