## **ABSTRACT:**

Analysis of adrenal gland surgery performed in the Department of Endocrine Surgery and the Department of Vascular Surgery, Copernicus Memorial Hospital in Łódź in 2014-2018 years.

Kusiński Michał (1), Sopiński Jan (1), Cywiński Jacek (2), Kuzdak Krzysztof (1)

Presenting author: Michał Kusiński

- 1. Endocrine, General and Vascular Surgery Department, Medical University of Lodz, Lodz, Poland
- 2. Vascular, General and Oncologic Surgery Department, Copernicus Memorial Hospital, Lodz, Poland

The most common indications for adrenal surgery include tumors. These diseases, although quite rare, could be a serious surgical problem. In the case of minimally invasive techniques, surgical treatment requires proper training of the surgeon and advanced equipment.

We analyzed adrenal surgery in our center in 2014-2018. There were 211 operations of this type. 52 of them were performed using the open technique, 159 (75.36%) by minimally invasive techniques (laparoscopy, retroperitoneoscopy). Among patients undergoing surgery, the percentage of women was 63.51%, men 36.49%. In 207 cases, the indication for surgery was a tumor, in 2 multi-organ trauma with adrenal lesion, in 2 isolated adrenal hemorrhage. In 4 cases, the operation of adrenal gland was extended: 2 cholecystectomies and 2 distal pancreatectomies were performed. In 1 case, the tumors turned out to be inoperable. We noted the following complications: perioperative death - 2 (0.95%), hemorrhage - 4 (1.9%), conversion to open surgery - 5 (3.14% of minimally invasive procedures). Recurrence of the disease requiring reoperation was noted in1 case. We analyzed the time of hospitalization and patient's pain.

Summarizing, adrenal gland excision is an advanced surgical procedure. The gold standard are operations with minimally invasive techniques. Their higher material cost and the necessity advanced training level of the performing surgeon are compensated by the short hospital stay, less pain and reduced risk of postoperative complications. Minimally invasive techniques allow extending procedures for other organs during one anesthesia.

**Kategoria:** K2. Wyzwania chirurgii XXI wieku – możliwości i ograniczenia / Operacje z wykorzystaniem technik minimalnie inwazyjnych / Twenty-first century surgery challenges – possibilities and limitations / Operations using minimally invasive techniques