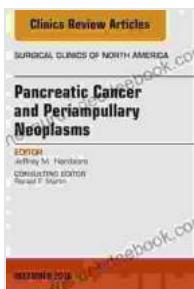


Pancreatic Cancer and Periampullary Neoplasms: An Issue of Surgical Clinics

This issue of Surgical Clinics focuses on Pancreatic Cancer and Periampullary Neoplasms, with topics including:



Pancreatic Cancer and Periampullary Neoplasms, An Issue of Surgical Clinics of North America (The Clinics: Surgery Book 96) by Leon Barnes

4.5 out of 5

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Text-to-Speech : Enabled

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Enhanced typesetting : Enabled

Print length : 285 pages



- Surgical Resection for Pancreatic Cancer: Evolution of Technique and Impact on Outcomes
- Periampullary Adenocarcinoma
- Distal Pancreatectomy for Malignant and Benign Disease
- Sarcomas of the Pancreas and Periampullary Region
- Cystic Neoplasms of the Pancreas
- Advances in Robotic Pancreatectomy

- Update on Neoadjuvant Therapy and Perioperative Management of Pancreatic Adenocarcinoma
- Surgical Management of Pancreatic Neuroendocrine Neoplasms
- Surgical Management of Intraductal Papillary Mucinous Neoplasms

Pancreatic cancer is the third leading cause of cancer death in the United States, with a 5-year survival rate of less than 10%. Periampullary neoplasms are a group of cancers that arise from the periampullary region, which is the area where the bile duct and pancreatic duct join the duodenum. These cancers are also relatively rare, but they are often difficult to treat and have a poor prognosis.

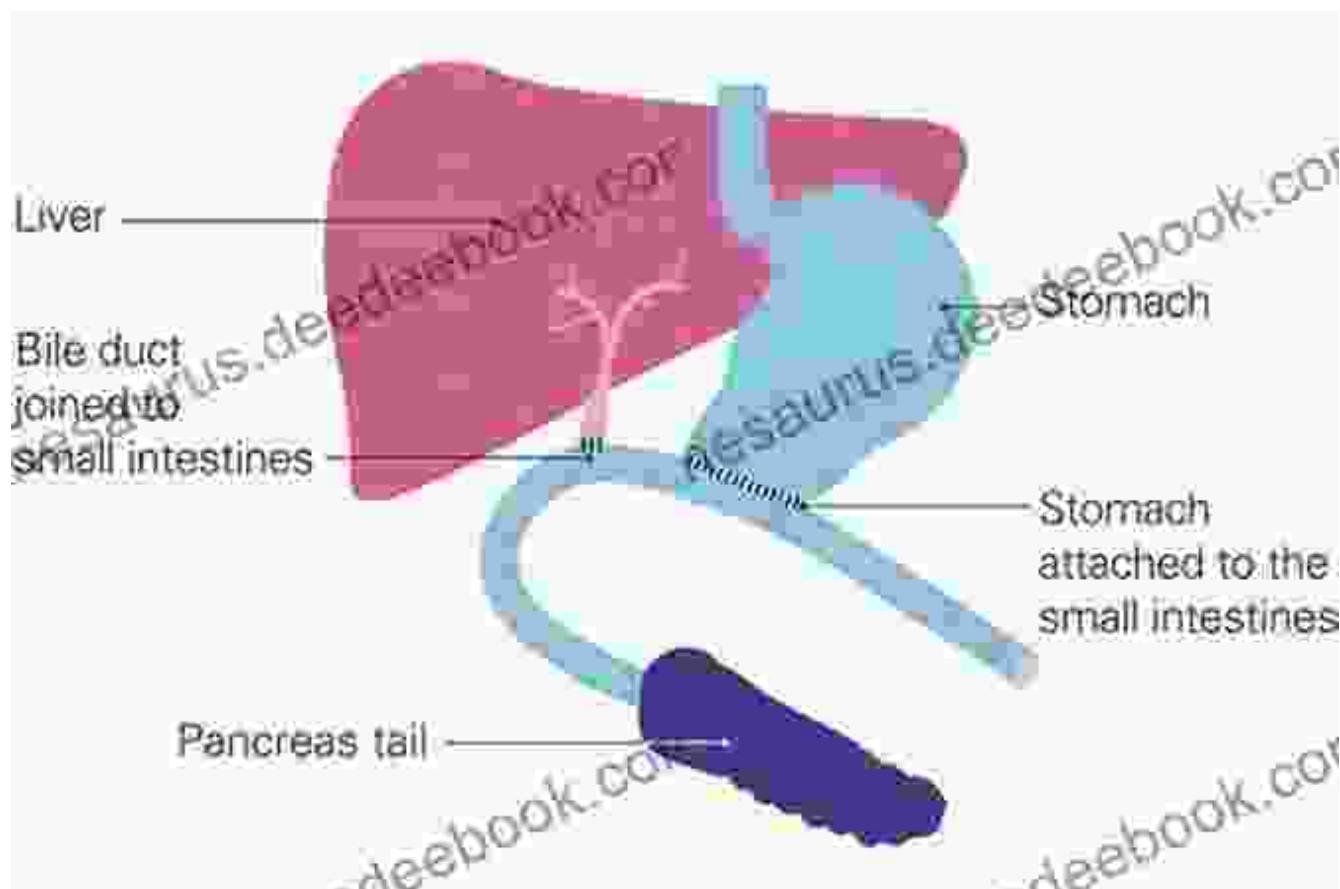
This issue of *Surgical Clinics* provides a comprehensive overview of the latest developments in the surgical management of pancreatic cancer and periampullary neoplasms. The articles in this issue are written by leading experts in the field, and they provide practical guidance on the diagnosis, treatment, and management of these challenging diseases.

This issue of *Surgical Clinics* is a valuable resource for surgeons, oncologists, and other healthcare professionals who care for patients with pancreatic cancer and periampullary neoplasms.

Surgical Resection for Pancreatic Cancer: Evolution of Technique and Impact on Outcomes

Surgical resection is the mainstay of treatment for pancreatic cancer, but it is a complex and challenging procedure. The evolution of surgical technique has led to improved outcomes for patients with pancreatic cancer, but there is still room for improvement.

This article reviews the evolution of surgical technique for pancreatic cancer, and discusses the impact of these changes on outcomes. The article also provides recommendations for future research to further improve the outcomes of patients with pancreatic cancer.



Periampullary Adenocarcinoma

Periampullary adenocarcinoma is a cancer that arises from the periampullary region, which is the area where the bile duct and pancreatic duct join the duodenum. These cancers are relatively rare, but they are often difficult to treat and have a poor prognosis.

This article reviews the epidemiology, risk factors, diagnosis, and treatment of periampullary adenocarcinoma. The article also provides

recommendations for future research to improve the outcomes of patients with this disease.

Periampullary Tumors

- Defined as those that arise within 2 cm of the major papilla in the duodenum
- Classified on the basis of their tissue of origin
- Often difficult or impossible to differentiate from pancreatic head adenocarcinoma before performing a resection

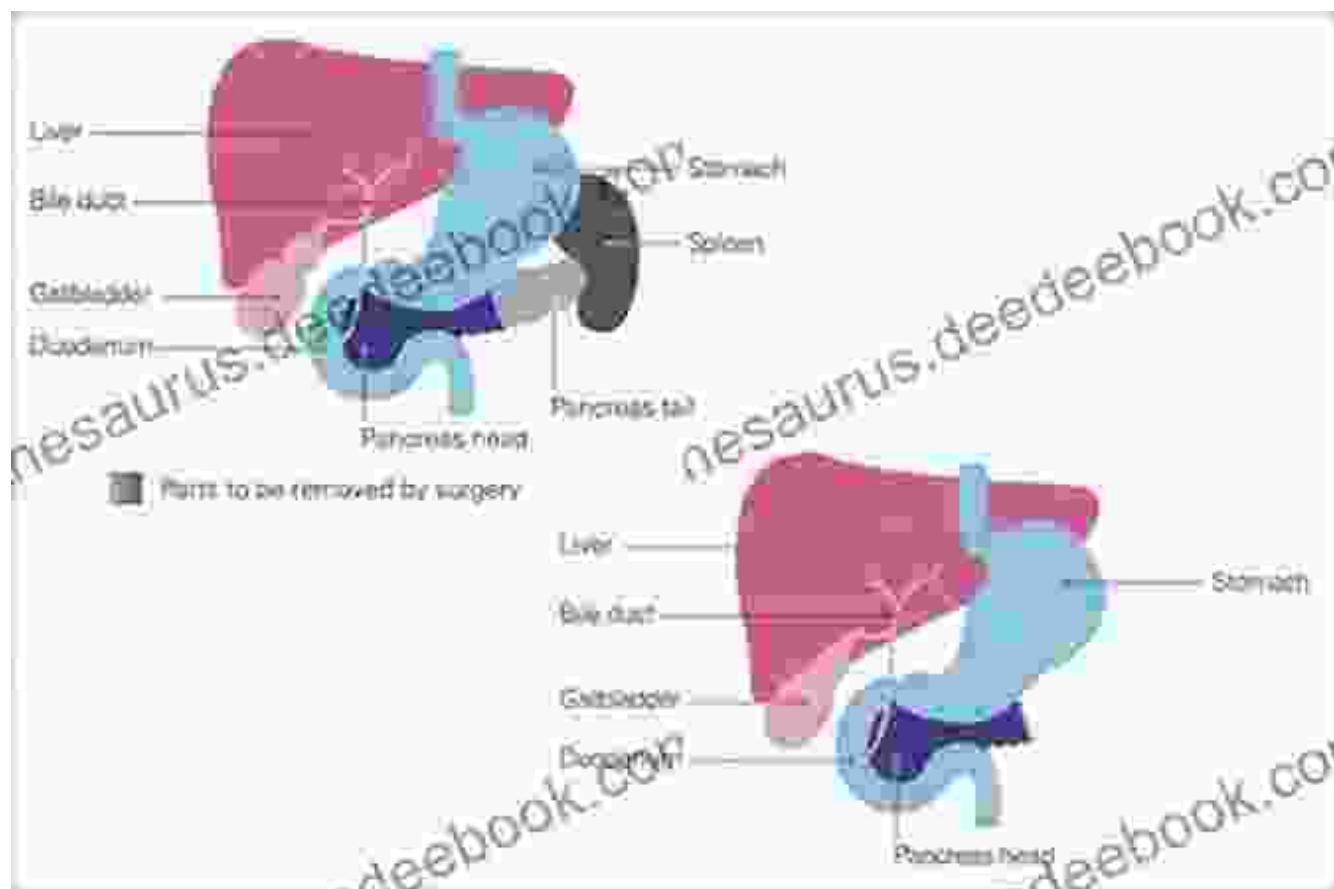


Periampullary adenocarcinoma is a cancer that arises from the periampullary region, which is the area where the bile duct and pancreatic duct join the duodenum.

Distal Pancreatectomy for Malignant and Benign Disease

Distal pancreatectomy is a surgical procedure to remove the tail and body of the pancreas. This procedure is performed to treat a variety of malignant and benign diseases of the pancreas.

This article reviews the indications, surgical technique, and outcomes of distal pancreatectomy for malignant and benign disease. The article also provides recommendations for future research to improve the outcomes of patients undergoing this procedure.



Sarcomas of the Pancreas and Periampullary Region

Sarcomas are a

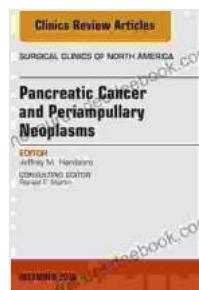
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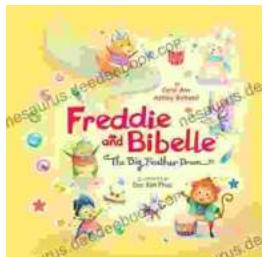
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