Surg Endosc. 2005 Jun;19(6):841-4. Epub 2005 May 4.

Laparoscopic adrenalectomy for malignant neoplasm: our experience in 15 cases.

Corcione F, Miranda L, Marzano E, Capasso P, Cuccurullo D, Settembre A, Pirozzi F.

Department of General and Laparoscopic Surgery, A.O. Monaldi - Napoli, Via L. Bianchi, 80131, Naples, Italy.

BACKGROUND: We report our experience with laparoscopic adrenalectomy (LA) for malignant pathologies that in some cases required a multiorgan resection. METHODS: In this study, we retrospectively reviewed a group of 15 patients (10 men, and five women) who underwent an operation for primitive or metastatic adrenal malignant tumors. RESULTS: The sizes of the lesions ranged from 3.5 to 8.5 cm (average 3.6). We performed 11 adrenalectomies (four right and seven left), two left adrenalectomies with distal spleno-pancreatectomy, one right adrenalectomy with nephrectomy, and one laparoscopic exploration that showed a peritoneal spreading. Six patients, with a follow-up ranging from 3 to 24 months (mean 13.6 months), are disease free; the others developed metastatic repetitions or local recurrences. CONCLUSIONS: LA could be performed always respecting the oncological principles of radical excisions. This approach in our patients has been associated with low morbidity, low intraoperative blood loss, short hospital stay, and fast functional recovery.