

The current status of laparoscopic hepatopancreatobiliary surgery in Southeast Asia

The progress of minimally invasive hepatopancreatobiliary (HPB) surgery in the past two decades has been noteworthy, it has permeated and transformed practice in many parts of the world, including Southeast Asia (SEA). The experience and encouraging results from the pioneers to the early adopters has inspired and converted many in HPB community to start adopting these MIS approaches.

We recently celebrated the 50 years golden jubilee of the Association of Southeast Asian Nations (ASEAN). It is thus timely for this special issue to examine the current status of laparoscopic HPB surgery in SEA, to hear the opinions and share experience of the HPB community in the region.

SEA unfortunately has one of the highest prevalence rates of hepatitis B and C in the world. In the recent years, increasingly, we are experiencing problems of alcohol-related cirrhosis and non-alcoholic steatohepatitis as well. This coupled with a variety of complex social and cultural reasons limiting deceased and living liver organ donation rate, the criteria and threshold for liver resection in many parts of SEA often goes beyond the established criteria used in the West such as the Barcelona clinic liver cancer (BCLC). It is not therefore uncommon to perform significant resections in cirrhotic patients even in those with portal hypertension.

As we commend and encourage the effort in pushing technical boundaries by the HPB surgical community, we must bear dear that these pursuits must not just translate to improving patient's life, adding not just years to life but quality life to years as well.

From a unique SEA perspective, leading experts and teams share their thoughts and experiences on the current status of laparoscopic HPB in their country, each with their own story to share and for the benefit of all us to learn.

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