

# COMPARISON BETWEEN TWO CIRCULAR STAPLER: ILS vs PANTHER

A. Soto Sánchez, M. Hernández Barroso, N. Díaz Jiménez, G. Hernández Hernández, L. Gamba Michel, J. G. Díaz Mejías, A. Goya Pacheco, M. Barrera Gómez.  
HOSPITAL UNIVERSITARIO NUESTRA SEÑORA DE CANDELARIA.  
Tenerife, Canary Island, SPAIN



## OBJECTIVE

Anastomotic leakage is still a challenge for the colorectal surgeon.  
The aim of the study is to present the outcomes in colon surgery after including a new type of circular stapler.

n = 238

◆ Group A:  
129 ILS

◆ Group B:  
109 Panther



Sex  
Age  
Comorbidity  
Anaemia  
Hypoalbuminemia

## METHODS

- This retrospective, observational and descriptive study analysed data related to 238 patients who underwent colon surgery between June 2013 and December 2017.
- Surgical result, demographic data, surgical procedure, morbidity and length of hospital stay have been compared between two circular stapler: ILS® y PANTHER® .

## RESULTS

A total of 238 patients that received colon surgery with circular stapler anastomosis were included, 129 with ILS® (Group A) and 109 with PANTHER® (Group B).

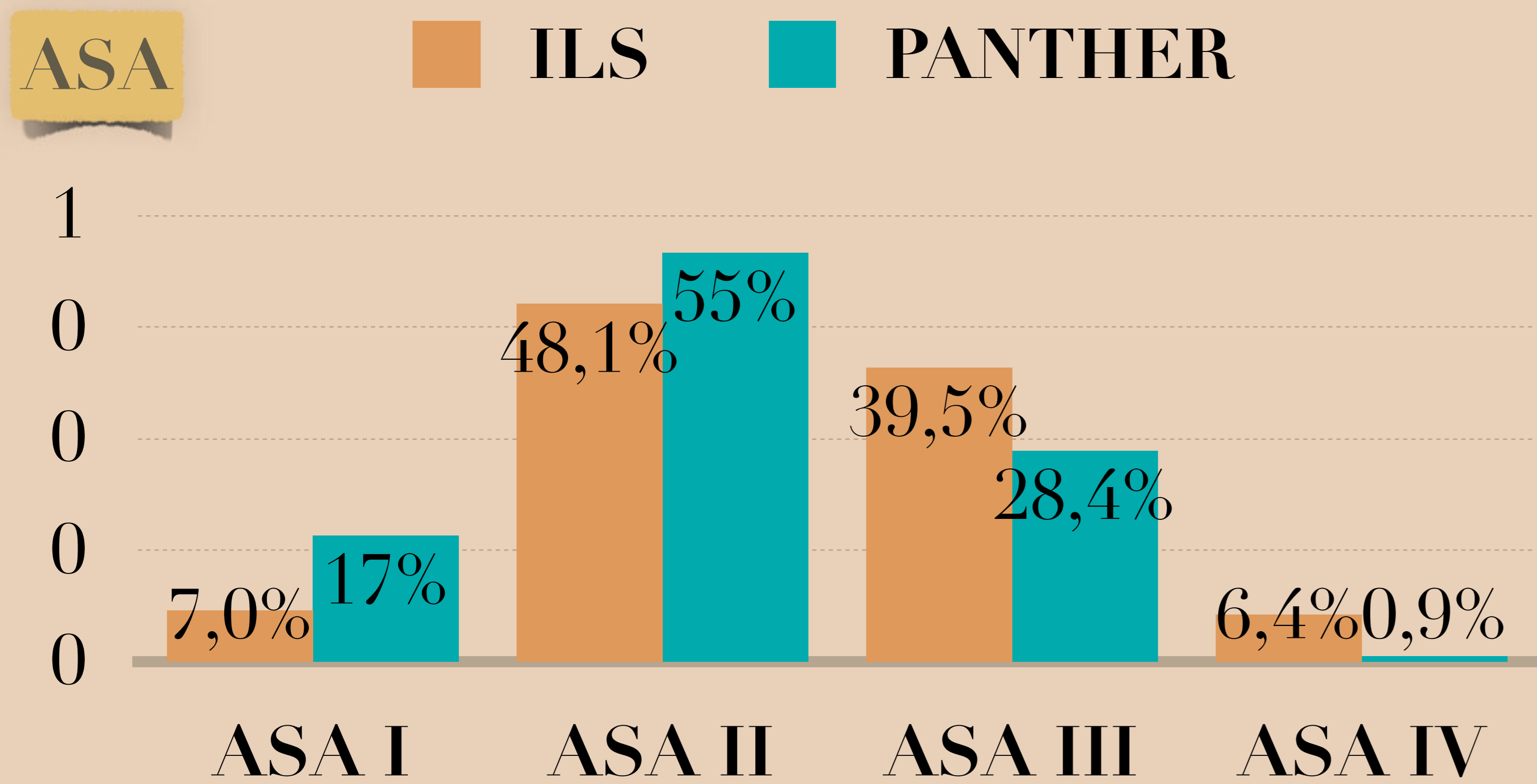
They were classified according to **ASA**, we found significant differences between both groups, finding a higher proportion of ASA III patients in group A (39% vs. 28%) and ASA II in group B (48% vs. 55%).

The **main surgical indication** in both groups was cancer

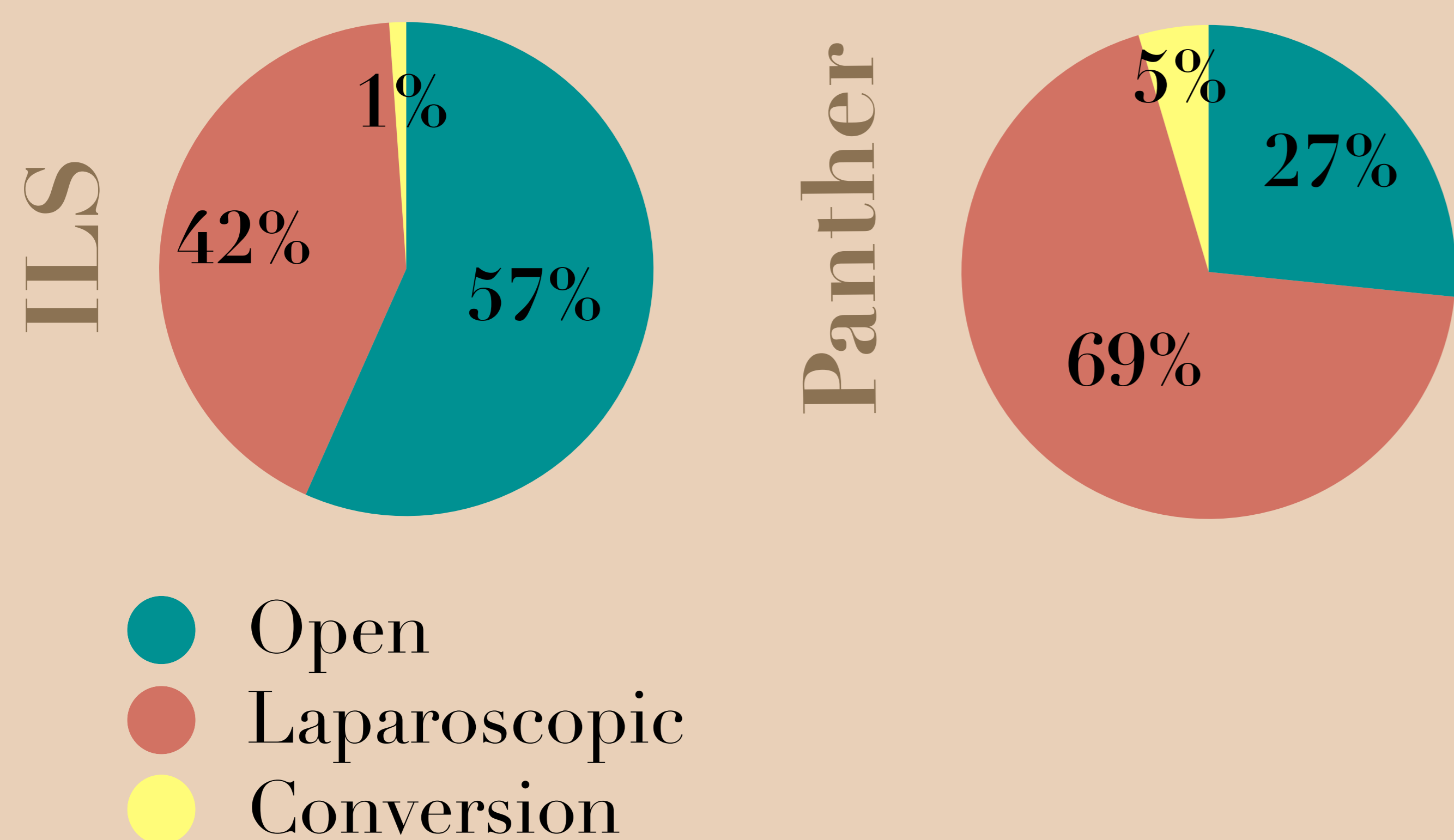
The **most frequent technique** was right hemicolectomy.

The **approach** was mainly open in group A and laparoscopic in group B ( $p < 0.01$ ).

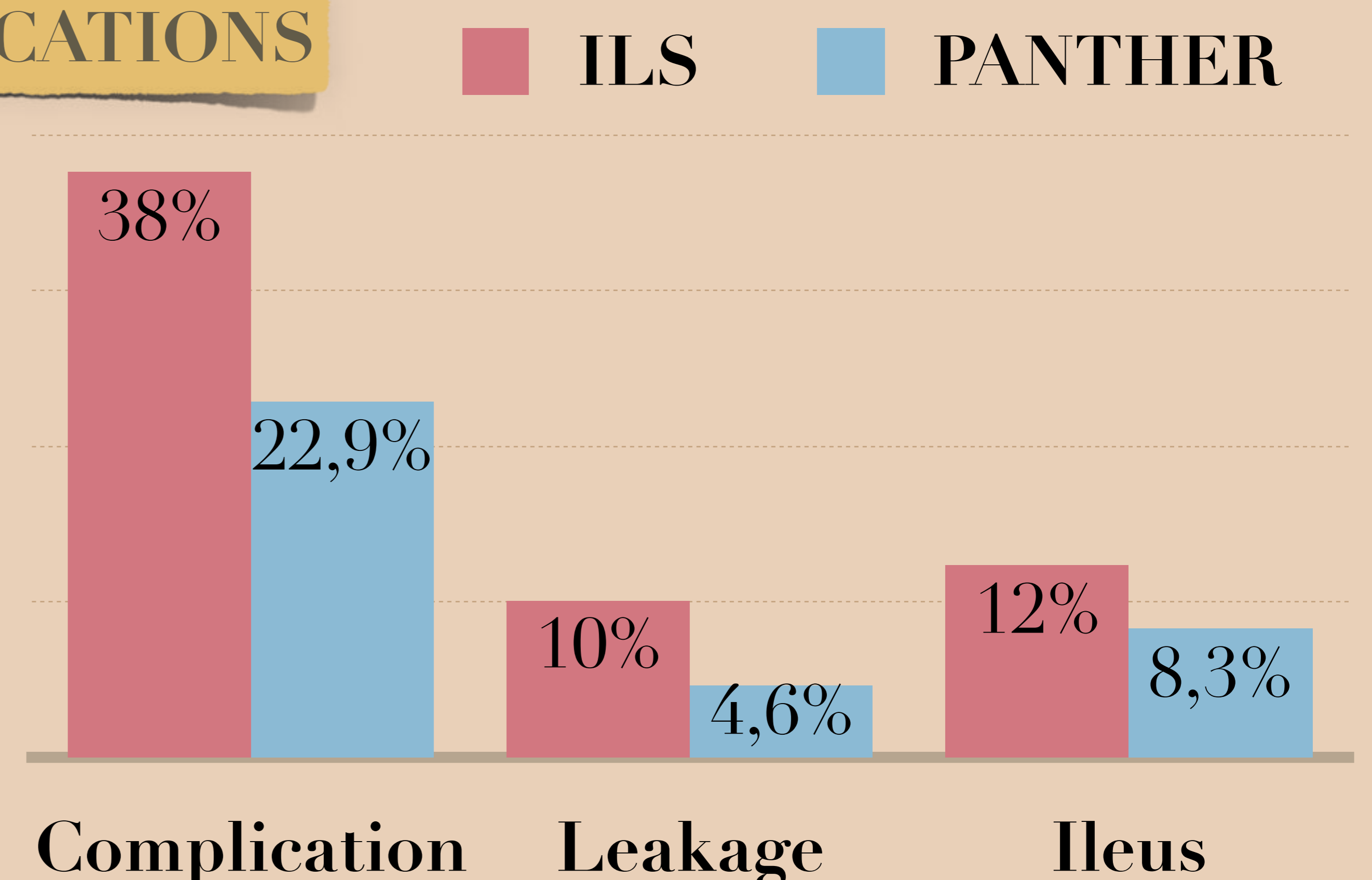
The PANTHER® group presented lower complications, although only significant differences were found in Clavien IIIb (group A 16.3% vs Group B 4.6%  $p = 0.04$ ), with less leakage percentage (10.1% vs 4.6%), ileus (12.4% vs 8.3%), and hemorrhage (4.7% vs. 3.7%) although without statistical differences.



## APPROACH



## COMPLICATIONS



## CONCLUSIONS

In our series, and although we know that there are other factors that influence the results (for example, higher percentage of laparoscopic approach in Group B), we can say that the use of this new endostapler does not mean an increase in complications, with clinically relevant results.