**Supplementary Table 1: Definitions of complications**

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| **Mortality**  Death of a patient, during or within 90 days after the initial surgical procedure that is related to the surgical procedure.**Readmission**  Every re-hospitalization due to a complication of the index hospitalization within the first 6 months. **Intra-abdominal abscess** Any quantity of purulent fluid leaking via the abdominal drain; walled off collection of pus in the abdominal cavity at the time of radiological imaging, reoperation or percutaneous drainage; fluid in drain or intra-abdominal collection should be culture positive.**Wound infection**  Defined according to the Centres for Disease Control and Prevention18 Superficial incisional surgical-site infection and deep incisional surgical site infection, which occurs within 30 days after surgery. This includes both the superficial surgical-site infections and the deep incisional surgical site infections. Most of these wound infections were opened at bedside by the physician or surgeon. **Pancreatic fistula/pancreaticojejunostomy leakage** Defined according to the International Study Group of Pancreatic Fistula 19(Grade A, B and C) **Delayed gastric emptying** Defined according to the International Study Group of Pancreatic Surgery 20 (Grade A,B and C) **Biliodigestive anastomosis leakage** Any quantity of bile leaking via the abdominal wound or drains at least 48 h after surgery, intra- abdominal collection of bile (confirmed radiologically) or cholangiographic evidence of contrast leakage. Laboratory: three times higher bilirubin in the drain or intra-abdominal collection compared with normal serum bilirubin levels. **Sepsis/multi organ failure** Definition from the 2001 International Sepsis Definitions Conference21**Post pancreaticoduodenectomy hemorrhage**Definition according to the ISGPS classification of post pancreaticoduodenectomy haemorrhage22**Gastrojejunostomy leakage**Leakage of the gastrojejunostomy anastomosis documented either by confirmatory upper gastrointestinal contrast x-rays. CT scans, or reoperation23.**CT-drainage**  Drainage of intra-abdominal fluid collections during CT by inserting a percutaneous drain during the hospitalization or readmission period. **Relaparotomy** Any complication after the initial PPPD or Whipple operation leading to a laparotomy as an intervention, during the index hospitalization or the readmission period.   |

**Supplementary table 2: Complications by type of resection**

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|  | Whipple (n=53) | PPPD (n=177) |
| Intra abdominal abscess | 7 (13.2) | 28 (15.8) |
| DGE | 3 (5.7) | 19 (10.7) |
| Pancreatic fistula | 10 (18.9) | 19 (10.7) |
| Gastrojejunostomy leakage | 1 (1.9) | 3 (1.7) |
| Bile/hepaticojejunostomy leakage  | 2 (3.8) | 11 (6.2) |
| Post-pancreatectomy hemorrhage | 4 (7.5) | 7 (4.0) |
| Sepsis | 2 (3.8) | 9 (5.1) |
| Mortality | 4 (7.5) | 7 (4.0) |
| Urinary tract infection | 3 (5.7) | 6 (3.4) |
| Ileus | 2 (3.8) | 7 (4.0) |
| Abdominal wound dehiscence | 2 (3.8) | 4 (2.3) |
| Pneumonia | 4 (7.5) | 12 (6.8) |
| Wound infection | 7 (13.2) | 23 (13.0) |
| Diabetes Mellitus de novo | 0 | 3 (1.7) |
| Cerebrovascular accident | 0 | 2 (1.1) |
| Gastro-intestinal ulcer | 0 | 1 (0.6) |
| Cholangitis | 2 (3.8) | 1 (0.6) |
| Dumping | 0 | 1 (0.6) |
| Patients without complications  | 35 (66)  | 102 (58) |

Values in parentheses are percentages. *† p<0.05*

DGE: delayed gastric emptying