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Jain A¹, Gautam G¹, Ahlawat R¹

1. Medanta - The Medicity Hospital

ROBOTIC SACROCOLPOPEXY - TECHNICAL NUANCES

Introduction

This video demonstrates the technical nuances to save time and effort, while performing Robotic Sacrocolpopexy for vaginal vault prolapse.

Design

Robotic Sacrocolpopexy has now become the preferred corrective procedure for vault prolapse among many patients and providers. However the technique is yet not completely standardised.

We present some technical modifications, which in our experience make this procedure more efficient and easy to learn.

- 1) Using flat vaginal retractors instead of classical cylindrical ones gives a better demarcation of anterior and posterior surfaces of vaginal vault. This helps in both peritoneal dissection as well as in mesh fixation and in this way it also avoids rotational deformity of vault and subsequent vaginal pain.
- 2) We use suction cannula from right assistant port for developing retroperitoneal tunnel. Keeping this instrument superficial just beneath the peritoneum results in a straight tunnel formation rapidly and easily. Our previous attempts of dissecting tunnel by robotic instruments have sometimes resulted in deeper blind paths, which also carry the risk of damage to vital structures lying in presacral area.
- 3) By fixing mesh on vault first anteriorly and then using third robotic arm to hold long arm of mesh for retraction in ventroanterior direction, gives excellent exposure of posterior surface and makes suturing faster and easier.

Results

We found these techniques as potentially safe and a way out to overcome some of the difficulties faced while doing robotic sacrocolpopexy. Their impact on operative time and resulting complications needs to be further evaluated.

Conclusion

More research and studies are required to refine this surgical technique with aim of making it an easy and feasible option even for older patients with multiple co morbidities.

Disclosures

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