

Laparoscopic Single Port Hysterectomy through a blunt 12mm Trochar - Testing the limits of Minimally Invasive Surgery

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Abstract

Single Port Laparoscopic Hysterectomy was performed with our ultra-minimally invasive technique, using a 12mm bladeless laparoscopic trocar followed by an Olympus(C) TriPort device and articulating 5mm laparoscope, without in any way stretching or extending the 12mm port.

Objectives

The aim of this study is to publish the novel technique used by one surgeon performing a laparoscopic hysterectomy performed through a single 12mm bladeless incision. With the exception of pure vaginal hysterectomy we believe this technique is the least invasive technique published thus far.

Methods

Although our sample size is extremely small, we believe it is critical to publish this important technique so that other laparoscopic surgeons who are also testing the limits of minimally invasive surgery can be aware of the success of this technique.

This technique relies upon a veress needle entry followed by placement of a Olympus(C) TriPort device through an incision that was created by a 12mm blunt trochar port, for minimal fascial footprint.

Other novel aspects of our technique include placement of the single port at the bottom of the umbilicus regardless of patient BMI, the usage of intra-abdominal marcaine to help with postoperative pain and vaginal repair of colpotomy.

Results

Laparoscopic Single Port Hysterectomy was performed on all six patients with a mean operating time of 57 minutes. All cases were completed without the need for additional ports, conversion to laparotomy, extension of the 12mm incision or any component of traditional vaginal hysterectomy. Average EBL was 117cc. Our complication rate was zero in this limited study of 6 patients.

Conclusion

In the realm of laparoscopic surgery, we believe this is the most minimally invasive surgical technique published to date. We hope the publication of our novel technique serves to promote minimally invasive surgery.

References

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