

Single-incision surgery repertoire expands to treat colorectal conditions

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(Medical Xpress) -- A minimally invasive "bellybutton" surgery technique already used to remove smaller organs like the gallbladder and appendix has now been adapted to allow URMC surgeons to excise much larger organs – like the colon, which in many adults measures almost five feet long.

Unlike traditional minimally invasive procedures, in which surgeons triangulate from three to four half-inch ports, this bellybutton technique (also known as "single-incision <u>surgery</u>") manipulates multiple instruments, including a small camera probe, through just one single access point – usually the navel.



Thanks to working through this single port, patients have been experiencing less post-operative pain, and in many cases, surgeons can erase the need for leaving permanent, visible scars.

While URMC surgeons have been using single port access surgeries for years now (in fact, URMC urologic surgeons introduced the through-thenavel technique to the Rochester region back in late 2008), colorectal surgeon Todd Francone, M.D., is the first in the region to offer the technique for colon removal surgeries – a slightly more complex application, given that the colon wraps around all four "corners" of the abdomen.

Patients typically undergo colon removals, or colectomies (sometimes just half or part, known as a "hemicolectomy"), for cancerous conditions or benign inflammatory bowel diseases like Crohn's, diverticulitis, ulcerative colitis, and more.

"The beauty of the single incision laparoscopic colectomy is that it makes minimally invasive surgery even more minimally invasive," Francone said. "Of course, our first concern with any new procedure is to make certain that it's as equally safe and effective as standard laparoscopic surgery – and there is indeed literature supporting this for single-incision colectomy. What's more, it also might subject patients to less painful recoveries. And of course, the cosmetic benefit – the potential for no noticeable scarring – is an undeniable perk, especially for young people."

Francone has used the technique to perform more than two dozen colectomies/hemicolectomies in the past year. He says the surgery is best suited to a specific patient population – typically trimmer patients – and to certain procedures, like elective (not emergency) colectomies.

"Our group offers a broad approach to minimally invasive surgery, from



straight laparoscopy to robotics to single-incision," Francone said. "We work with each patient in advance to discuss the various options, and why we think one might be suited to them better than others, based on their individual health and their particular condition."

Francone said the single-incision colectomy might be an especially good fit for adolescents.

"This is a group for whom surgery can be especially stressful," he said. "Being able to offer them minimal incisions, and sometimes no obvious long-term scarring, can help put them at ease."

Provided by University of Rochester Medical Center

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