Robotic radical hysterectomy and extensive pelvic lymphadenectomy for endometrial cancer in patients with morbid obesity: the role of an experience robotic surgeon in female urogenital cancer

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Objectives

To represent, with illustrated video, the role of experience robotic urologic surgeon (in more than 1.500 cases as console surgeon including decades of radical cystectomies in female patients) in challenging cases of gynecological cancer treating with robotic surgery.

Material

A 63 years old patient with BMI 48 kg/m² was diagnosed with endometrial cancer after dilatation and curettage of endometrium. The ultrasound examination revealed a uteral fibroma and an ovarian cyst. From the medical history she underwent caesarean section. We proceeded to robotic-assisted total hysterectomy, bilateral salpingo-oophorectomy and extensive lymphadenectomy.

Results

The procedure lasts 110 minutes, blood loss was 130 ml, the drain was removed at the second day and the total hospital stay was 3 days. In the last 2 years we performed totally 3 radical hysterectomies in patients with morbid obesity (BMI>40kg/m²) in cooperation with the gynecological clinic of our hospital.

Conclusions

In cooperation with a gynecological team and in the hands of an experienced urologist as a console surgeon, da Vinci method for female urogenital cancer, can be a safe minimal invasive procedure with favorable clinical outcomes