

## AB046. 100. Robotic assisted colorectal surgery at University Hospital Limerick

## Daniel Westby<sup>1</sup>, Rishabh Sehgal<sup>1</sup>,Kah Hoong Chang<sup>1</sup>, David Waldron<sup>1</sup>, Eoghan Condon<sup>1</sup>, J. Calvin Coffey<sup>1, 2</sup>, Colin Peirce<sup>1,2</sup>

<sup>1</sup>Department of Colorectal Surgery, University Hospital Limerick, Limerick, Ireland; <sup>2</sup>Graduate Entry Medical School, University of Limerick, Limerick, Ireland

**Background:** Minimally invasive surgery has revolutionized surgical procedures for the past three decades. The department of surgery at the University Hospital Limerick (UHL) has taken the next step with the implementation of a robotic assisted surgical programme. The Da Vinci Xi robot was installed in UHL in 2016 and provides the operating surgeon with three-dimensional vision, 7° of wrist-like motion, tremor filtering, motion scaling, better ergonomics, and less fatigue. The aim of this study is to present our robotics data since the implementation of the colorectal robotics programme.

**Methods:** A retrospective review of a prospectively maintained colorectal robotics registry was conducted from June 2016 to November 2017. Paper and electronic charts

were utilized to obtain demographic and clinicopathological data. Salient perioperative robotic parameters such as docking time, estimated blood loss, and total operative time were recorded.

**Results:** A total of 48 (29 female, 22 male; mean age  $62.86\pm14.87$  years) robotic colorectal surgeries were conducted during the study period. The median length of stay (LOS) was 6 (range, 2–37) days overall. The median docking time was 32 (range, 20–68) minutes. The median operative time overall was 257.5 (range, 147–434) minutes. Mean estimated blood loss was 78.02 $\pm$ 75.9 mL. Average lymph node yield for cancer cases was 13.6 $\pm$ 8.

**Conclusions:** The robotic assisted colorectal surgical programme has been successfully implemented in UHL. Trends for all key robotic performance indicators have improved significantly since the initiation of the programme. Oncological outcome remains in-line with international guidelines.

**Keywords:** Colorectal; robotics; minimally invasive; Da Vinci Xi; oncological clearance review

doi: 10.21037/map.2018.AB046

**Cite this abstract as:** Westby D, Sehgal R, Chang KH, Waldron D, Condon E, Coffey JC, Peirce C. Robotic assisted colorectal surgery at University Hospital Limerick. Mesentery Peritoneum 2018;2:AB046. doi: 10.21037/map.2018.AB046