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## Introduction of a robotic rectopexy programme with benchmarking to international standards in published randomised controlled trials

Gareth Wilkinson, Christina Fleming,  
Ann Brannigan

Department of Colorectal Surgery, Mater Misericordiae University Hospital, Dublin, Ireland

**Background:** With the evolution of robotic surgery, the adoption of a robotic approach to perform rectopexy, in particular ventral mesh repair (VMR), is gaining popularity. We aimed to audit clinical outcomes following introduction of a robotic rectopexy (RR) programme and compare outcomes to internationally published randomised controlled trials (RCTs).

**Methods:** Consecutive patients undergoing RR from July to December were included. The daVinci Xi surgical system (Intuitive, CA, USA) was used for all procedures using a modified left lower abdominal approach. Where VMR was performed, a 4×18 cm Permacol mesh was used as standard and posterior fixation using Ethibond. We compared operative times and 30-day clinical outcomes to international data.

**Results:** Over a 6-month period, thirteen RR were performed (n=1 sutured, n=2 resection sutured, n=10 VMR). All patients were female with a mean age of 60.4 years (SD 14.12). Mean time from 1st consultation to surgery was 10.7 months. Three patients had an external rectal prolapse and ten patients a rectocele confirmed on dynamic MRI. Seven patients had co-existing urinary symptoms impacting on quality of life. Median docking time was 23 minutes and median robotic operative time was 194 minutes

(156 minutes reported). There were no conversions (2.5% reported). Average length of stay was 5 days (4 days reported) and there were no 30-day morbidities (8.6% reported) or readmissions.

**Conclusions:** RR can be performed with appropriate operative times and clinical outcomes and offers a superior operative platform for critical operative steps including rectal mobilisation and VMR mesh placement and suturing.

**Keywords:** Outcomes; rectopexy; robotic surgery; robotics; ventral mesh repair (VMR)

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### Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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