

AB007. SOH23ABS_088. Our experience with a dual-console da Vinci Xi surgical system in a public teaching hospital setting under challenging environment of highly strained Irish public health care system

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Background: Minimally invasive surgery has become a new standard of care in various surgical fields. Robotic-assisted laparoscopic surgery (RALS) benefits both patient and surgeon alike. There are differences in the theatre team and work environment between public and private hospitals in Ireland. Frequent change of theatre staff and cancellations are not uncommon in public hospitals. Coronavirus disease 2019 (COVID-19) pandemic has further exposed these differences with cancellation of elective theatre list. We report our up-to-date experience with a variety of urological procedures performed using a da Vinci Xi robotic system at our public teaching university hospital.

Methods: A prospectively maintained robotic data base was used for this study. The dual-console Da Vinci Xi[®] Robot was utilized for all cases since July 2016. The type and number of procedures were recorded, along with patient demographics, length of stay, morbidities, and mortalities as per the Clavien-Dindo classification.

Results: Complete data were collected on 260 procedures which included 110 partial nephrectomy, 85 radical nephrectomy, 26 pyeloplasty, 15 Adrenalectomy, 11 nephroureterectomy, 8 cystectomy, 2 psoas-hitch with uretero-

cystoneostomy, one of each vesico-vaginal fistula repair, renal cyst marsupialization and trans-vesical Freyer's prostatectomy. The median length of stay was 3 days. The median estimated blood loss was 50 mL. Six procedures (2.5%) were converted to open. Eight and four patients experienced Clavien-Dindo Grade 2 and 3 Complications respectively. There was no mortality.

Conclusions: In spite of several constraints in our public hospital system, RALS can be safely implemented to a wide spectrum of urological conditions. The benefits to patients and hospital are obvious.

Keywords: Dual console Xi; teaching hospital; robot assisted laparoscopic surgery; coronavirus disease 2019 pandemic (COVID-19 pandemic); Ireland

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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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