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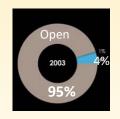
# Robotic Surgery

## Colectomies, Inguinal, and Incisional Hernias Following the Path of the Prostate



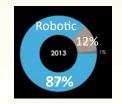
#### The Lesson From the Robotic Prostate

In 2003, prostate surgery was an open procedure. Only 1% was done laparoscopically and 4% was done robotically. The interesting thing about that is that in 2003 we were 15 years into the laparoscopic era while only 3 years into the robotic era. Yet, already four times more procedures were being done on the robot than laparoscopically. Something about this new minimally invasive



platform made it work for complicated surgery that couldn't be duplicated on the mature laparoscopic platform. Many urologists recognized these benefits and a new gold standard emerged. By 2013 robotic prostatectomy was clearly

the new gold standard. Hysterectomies for malignancy have also seen this transition to a new standard. (Premier Data 2003, 2005, and 2013) These procedures represent a recurring history lesson where open surgery predominance was replaced by robotics completely bypassing any sort of laparoscopic phase for the procedure. In 2013, despite being 25 years into the laparoscopic era, colecto-



mies and incisional hernias both have seen only about a 1/3 penetration of laparoscopy despite proven benefits for patients. The latest robotic advanced platform, the Da Vinci Xi, shows promise to finally take colectomies, inguinal hernias, and incisional hernias along the path of the prostate to a new gold standard as a robotic surgery!

#### Twenty Fold Growth in Robotic Inquinal Hernia Repairs

In 2013 the inguinal hernia repairs done robotically accounted for only about 1% of all inguinal hernia repairs. Just three years later the robotic approach now accounts for close to 20% of all inguinal hernia repairs. This phenomenal growth has been fueled almost completely by the surgical community. Hernia thought leaders throughout the surgical community have recognize the increased capabilities of the robotic system allowing a dissection with more precision and less pain. This is in part due to the increased dexterity of the wristed instruments and to the incredible 3-D magnified high-resolution view of the robotic system. Many studies in this emerging era of robotic hernias are showing improved quality metrics, patient satisfaction, and improved total cost of care and value over other techniques.

#### What Is "The Robot"

The robot consists of 3 separate but interconnected parts. The "Patient Cart" (below) holds the instruments and connects to the trocars. The "Vision Cart" is similar to the laparoscopic tower. The "Surgeon Console" (above) is where the surgeon sits and controls the "robot".

#### Why Is Robotics Better?

- Improved Vision! Surgery with an HD, 3D, magnified, totally immersed view.
- Wristed Instruments!! This
   is a huge return of dexterity
   that was lost in laparoscopy.
- Improved Ergonomics! Now surgeons can sit in the same supported, comfortable position for every case.
- FireFly Visualization! A special dye is injected into the patient. A built in laser light is turned on. Presto! In the laser light the dye glows and now the surgeon can see incredible detail about bowel vascularity or the bile ducts right through other tissues.
- Vessel Sealer and Stapler!
   Rock stable control of these technologies allows greater precision and control in the critical use of these devices.

#### M. Brian Harkins, MD, FACS

#### Training:

LSU Medical School, New Orleans Eisenhower Army Medical Center, General Surgery 1989-1994 Surgeon at TRMC since 1997



### Dr. Harkins Shares His Experience with Colleagues

This past October the American College of Surgeons held its annual national conference in Washington DC. Dr. Harkins was honored to have the opportunity to share his experience with his colleagues in a guest lecture event where he chronicled his adoption of the "emerging" standard of laparoscopy in the 1990's and how that closely parallels his, and the surgical community's, current adoption of the new emerging standard of robotic surgery. He con-

tinues to provide surgeons across the US with case observations, proctoring, and acts as a colon and hernia robotics course instructor on a regular basis. In a separate event, Dr. Harkins will return to Washington DC as a guest instructor for the World Wide Sales Meeting of Intuitive Surgical. He will lecture on robotic right hemicolectomies and then help the attendees experience the performance of the procedure on a tissue model. While he enjoys sharing his experience with his colleagues, Dr.



Harkins is most pleased to provide the latest in advanced surgical care available today to the patients of northwest Houston!!!

Dr. Harkins delivers state of the art surgical care using the Da Vinci Xi system. Visit DrBrianHarkins.com!

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