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Perspective

Robotic Surgery: Is it Better for Reproductive Surgery and Gynecological Oncology?

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In recent years, surgical practice has been changed since the introduction of minimally invasive surgery. Laparoscopic and robotic surgery have significant advantages compared with laparotomy. Robotic technology has helped surgeons overcome many technical difficulties of conventional laparoscopic surgery. Robotics are feasible in the treatment of benign gynecologic conditions including endometriosis and uterine fibromatosis. Feasibility is also proven for endometrial cancer along with a short learning curve. Evidence suggests longer operative times compared to laparotomy, but similar or shorter than laparoscopy. Robot dogging time increases the global length of the procedure, but it decreases with experience. The overall morbidity rate seems lower than with other approaches. Hospital stay, postoperative pain and time to recovery are decreased when compared to laparotomy as well as to laparoscopy for some authors. Robotics may offer significant advantages in the treatment of morbidly obese patients who represent the vast majority of endometrial cancer patients. Furthermore, robotics are a real challenge in the treatment of pelvic endometriosis in which, surgery by laparoscopy often becomes extremely demanding and time consuming. Robotic techniques have benefits over traditional open surgery for management of endometrial cancer, especially in the group of obese patients for whom laparoscopy presents significant limitations. The main limit for the diffusion of robotic surgery is accessibility because of its important cost, although the new systems including Da Vinci Xi are much more beneficial for a more anatomic and accurate surgery, essential in reproductive surgery and oncology.

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