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EP-608 Robotic surgery in Inflammatory Bowel Disease: single centre experience

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Aims: Minimally invasive surgical approach has been shown to be beneficial especially with its utilization in the rectal dissection for the management of malignant disease. There has been growing interest in robotic approach in the surgical management of diverticular disease and inflammatory bowel disease (IBD). The aim of this study is to present our local institutional experience following implementation of a robotic service for surgical management of benign colorectal disease.

Methods: Data on patient demographics, intraoperative details, length of hospital stay (LOS), and postoperative complications were collected prospectively with a 30 day follow up. Patients included those who underwent robotic ileocaecal resection, subtotal colectomy, anterior resection, panproctocolectomy or proctectomy between April and December 2021, for benign disease including diverticular disease, IBD, or chronic constipation.

Results: Seventeen patients were included. 35% were male, median (IQR) age was 38 (22) years and BMI was 23 (2). Procedure duration was 181 (125) minutes, and one patient underwent conversion to open surgery. LOS was 9 (6) days and one patient required admission to HDU for one day. N=3 (18%) had ileus, and n=1 (6%) had an anastomotic leak, acute renal failure, or a chest infection. Two patients had collection requiring percutaneous drainage. No return to theatre or deaths were recorded.

Conclusions: Our early experience demonstrates encouraging outcomes as well as feasibility and safety of robotic approach in managing benign colorectal disease. Future studies with larger samples will allow to draw more definitive conclusions.