The First Trocar Placement After Multiple Open Abdominal Surgeries in Children: A Preliminary Report

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Abstract : Aim: Laparoscopy is very risky in patients undergoing, multiple open abdominal surgeries. The aim of this study, to define a safe method for the first trocar placement in children with a history of multiple open abdominal surgeries. Methods: Children who underwent laparoscopic surgery between March 2019 and April 2020 with a history of three or more open abdominal surgeries were included in the retrospective study. Patient information was obtained from the hospital automation system. Ultrasonography was used to determine the location of adhesions preoperatively. The first trocar was placed according to ultrasonography findings, using the Hasson technique to create an air pocket with finger dissection. The patient's preoperative, perioperative, and postoperative findings are reported. Results: A total of 10 patients were included in the study. The median number of operations before laparoscopy was three. The most common site for the first trocar entry was Palmer's point (40%). No mortality or morbidity was observed amongst any patients. The average number of adhesions detected by USG and observed on laparoscopy were significantly positively correlated. Conclusion: In children with a history of multiple abdominal surgeries, abdominal wall ultrasonography for visualization of adhesions and finger dissection for the formation of an air pocket appears to be a safe method for the first trocar insertion.

Keywords: abdominal wall, child, laparoscopy, ultrasonography

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