

Totally Robotic Gastric Bypass Using Modified Lonroth Technique

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Abstract : Background: Robotic Bariatric Surgery is a good option for the super obese where laparoscopy demands challenging technical skills. Gastric bypass can be difficult due to inability of the robot to work in two quadrants at the same time. Lonroth technique of gastric bypass involves a totally supracolic surgery where all anastomosis are done in one quadrant only. Methods: We have done 78 robotic gastric bypass surgeries using the modified Lonroth technique. The robot is docked above the head of the patient in the midline. Camera port is placed supra umbilically. Two ports are placed on the left side of the patient and one port on the right side of the patient. An assistant port is placed between the camera port and right sided robotic port for use of stapler. Gastric pouch is made first followed by the gastrojejunostomy that is a four layered sutured anastomosis. Jejunum jejunostomy is then performed followed by a leak test and then the jejunum is divided. A 150 cm biliopancreatic limb and a 75 cm alimentary limb are finally obtained. Mesenteric and Petersen's defects are then closed. Results: All patients had a successful robotic procedure. Mean time taken in the first 5 cases was 130 minutes. This reduced to a mean of 95 minutes in the last five cases. There were no intraoperative or post operative complications. Conclusions: While a hybrid technique of partly laparoscopic and partly robotic gastric bypass has been done at many centres, we feel using the modified Lonroth technique, a totally robotic gastric bypass surgery fully utilizes the potential of robotic bariatric surgery.

Keywords : robot, bariatric, totally robotic, gastric bypass

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