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EDITORIAL COMMENT

The incidence of urinary tract injury is low in most gynaecological operations. A systematic MEDLINE search for urinary tract injuries at gynaecologic surgery found that the ureteral injury rate was 7.8 per thousand cases for laparoscopic hysterectomy. However, undiagnosed urinary tract injury can cause significant postoperative morbidity for the patient and legal process for the gynaecologist. Open surgical management was traditionally the exact treatment approach for these conditions. This paper represents the largest cohort of robotic reconstructions of gynaecological injuries to date. The authors evaluated the use of robotic-assisted laparoscopy in the repair of obstetric or gynecologic surgery-associated genitourinary injuries in selected patients. It is a retrospective, multi-institutional analysis of a relatively small group of patients with a heterogeneous group of urological injuries. They found that robotic-assisted laparoscopic repair of iatrogenic genitourinary injuries was technically feasible and was associated with acceptable short- to intermediate-term success.

The request for robotic-assisted reconstructive surgery and experienced robotic pelvic surgeons is likely to increase in the near future. While the role of robotic technology in genitourinary reconstruction remains in question, these data suggest that minimally invasive ureteral re-implant, ureteroureterostomy, and fistula repair may offer an acceptable alternative to open reconstruction.

REFERENCES


Çetin Demirdağ MD