VIDEOABSTRACT

VIDEOSURGERY

Video can be found at https://ceju.online/baza/tmp/man/man_2275/ceju_2275.mp4

Bladder-first approach for robot-assisted completely intracorporeal ileal ureter replacement for long-segment ureteral defects: video-based illustration

Swapnil Singh Kushwaha, Sidhartha Kalra, Kodakkattil Sreenivasan Sreerag, Lalgudi Narayanan Dorairajan, Atanu Kumar Pal, Mujahid Ali, Jithesh Purushothaman

Department of Urology, Jawaharlal Institute of Postgraduate Medical Education and Research, Puducherry, India

Article history
Submitted: May 18, 2023
Accepted: June 7, 2023
Published online: July 13, 2023

Citation: Kushwaha SS, Kalra S, Sreerag KS, et al. Bladder-first approach for robot-assisted completely intracorporeal ileal ureter replacement for long-segment ureteral defects: video-based illustration. Cent European J Urol. 2023; 76: 269.

Key Words: robotic surgery ‹› minimally invasive surgery ‹› ileal ureter substitution ‹› bladder-first approach ‹› long-segment ureteral defects ‹› ureteral stricture

Ileal ureter substitution is usually considered the last resort for the reconstruction of long-segment ureteral defects, and completely intracorporeal surgery is a challenging task. In this video, we present our experience and technique of modified bladder-first approach for robot-assisted completely intracorporeal ileal neoureter, emphasizing its notable advantages.

Four patients underwent robot-assisted ileal ureter replacement at our institute. Complete assessment of stricture location and length was performed prior to definitive repair. Demographic, peri-operative, and follow-up data were recorded. Video-based illustration highlights the modified surgical technique, technical nuances, and challenges encountered.

Among the 4 patients, 2 were males, and 2 were females, with a mean age of 28 years. The surgical indications included benign ureteral stricture following lithotripsy or sequelae of genitourinary tuberculosis. Two patients underwent conventional ileal ureter, and 2 underwent bladder-first approach. The mean operating time was 370 ±10 minutes and 287.5 ±2.5 minutes, respectively, for conventional and bladder-first approaches. Clavien-Dindo grade 2 and grade 3a complications were found in one patient each. At a median follow-up of 18.3 months, all the patients experienced symptomatic and radiologic relief, with preserved renal function.

Our video of the bladder-first approach for ileal ureter replacement highlights its safety and feasibility. By minimizing intraoperative time and reducing the patient position change, and undocking to a single occurrence, this modified technique shows promising potential. This signifies a paradigm shift in the management of long-segment ureteral defects, setting the stage for improved outcomes.

CONFLICTS OF INTEREST

The authors declare no conflicts of interest.

DECLARATION

Ethical approval and consent to participate: Ethical approval was obtained from the Institutional Ethics Committee, and written informed consent to participate was obtained from the patient. Patient consent statement for publication: The authors have received and archived patient consent for video recording/publication in advance of the video recording of the procedure. Written informed consent for the publication of details, images, and videos was obtained from the patient.

Corresponding author
Sidhartha Kalra
sid6121984@gmail.com