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Early Experience of Solo Surgeon Laparoscopic PPPD with Articulated Scope Holding Arm System: the feasibility and safety of short term surgical outcomes

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Introduction: Surgeons performing Laparoscopic PPPD usually requires two or three surgical assistants. However, those who perform the solo surgeon laparoscopic PPPD (SSLPD) simply need a scrub nurse because a passive camera holder can hold camera stably instead of surgical assistants. In this study, we investigate the feasibility and safety of the SSLPD with articulated scope holding arm system.

Methods: From April, 2017 to July, 2019, 11 patients underwent minimal invasive PPPD in our hospital. Among them, 9 patients underwent SSLPD and 1 patient underwent robotic single port plus 2 ports hybrid PPPD and 1 robotic single port plus 2 ports PPPD. The above 9 patients underwent SSLPD using passive camera holder (UNITRAC®, Carl-Braun-Stra ße 1, 34212 Melsungen, Hessen, Germany) which facilitate single-handed repositioning. And 1 patient underwent SSLPD using robotic single site surgical system (the da Vinci Xi® Surgical System (Intuitive Surgical®, Sunnyvale, CA)). Viewing by using a device such as Grasper was achieved by pulling and fixing Grasper using a towel click.

Results: 5 patients were female and the rest were male. 5 patients were diagnosed ampulla of vater caner, two were pancreatic cancer, one was common bile duct cancer, one was duodenal cancer and one had mucinous non-neoplastic cyst. And the mean operation time was 644 minutes and the mean estimated blood loss was 863ml and mean length of hospital stay was 13.2 days. There was no major complication except one patient developed postoperative bleeding but recovered after conservative treatment.

Conclusions: The SSLPD procedure using passive camera holder is feasible and safety

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