

# Having Robotic Assisted Gynaecological Surgery (RAS)

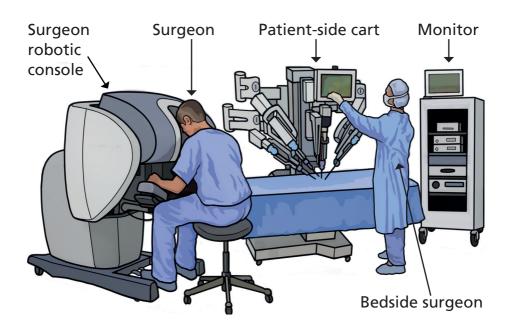
Information for patients



Robotic surgery, also referred to as robotically assisted surgery, is a form of minimally invasive surgery (key-hole surgery). The most widely used robotic equipment is the *da Vinci* Surgical System.

### The da Vinci Surgical System

The da Vinci Surgical System consists of several key components, including: an ergonomically designed console where the surgeon sits while operating, a patient-side cart where the patient lays during surgery, four interactive robotic arms, a high-definition 3D vision system, and proprietary EndoWrist® instruments.



### What is robotic-assisted surgery?

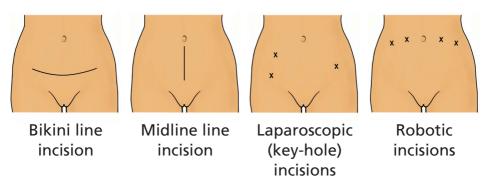
Firstly, it is important for you to understand that the robot is not performing the surgery.

Your surgeon still performs your operation, he or she stays with you in the operating room and uses their hands to control a camera and surgical instruments for performing the procedure.

Robotic assisted surgery is a form of minimal invasive surgery (key-hole surgery), your surgeon makes 4-5 incisions each about 0.5-1 cm long. Afterwards, he or she sits at a console next to you that allowing them to see in 3-D, high definition for a crystal-clear, magnified view of the operative field, and control instruments within the body that have an additional range of motion.

This enables the surgeon to operate in a precise, controlled manner with a better range of movement and vision.

#### **Incision sites**

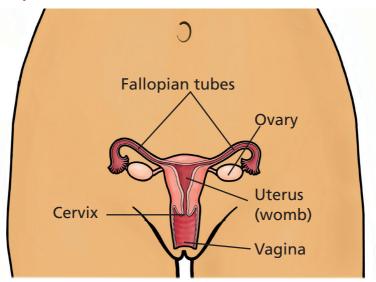


### Which type of gynaecological procedures are carried out by robotic assisted surgery?

The procedures that can be carried out robotically include:

- Hysterectomy (removal of womb)
- Salpingectomy (removal of fallopian tube)
- Oophorectomy (removal of ovary)
- Ovarian Cystectomy (removal of a cyst from the ovary)
- Excision of endometriosis (removal of endometriosis and scar tissue)
- Lymph node dissection (removal of lymph nodes)
- Myomectomy (removal of fibroids)
- Specific types of prolapse surgery.

#### Female reproductive



### Why am I being offered robotic assisted surgery?

The robotic system enhances precision, flexibility and control during your operation and allows your surgeon to better see the site of the operation, compared with traditional techniques. Using robotic surgery, surgeons can perform delicate and complex procedures that may be difficult with conventional techniques or that may normally require an open type of operation.

Often, robotic surgery makes minimally invasive surgery possible. Lastly, a robotic approach can be a particular advantage in women who have a BMI greater than 30.

### What are the benefits of having my surgery by robotic assisted method?

- There is less pain following the RAS.
- The scars after RAS are smaller.
- The complication of severe haemorrhage (escape of blood) is lower.
- The stay in hospital is shorter.
- Sometimes you can have the procedure and go home the same day as the surgery.
- Recovery time once home and returning to normal activity is shorter, usually 2 to 4 weeks.
- Lower risk of infection.

### What are the advantages of robotic assisted surgery over laparoscopic surgery?

While both robotic-assisted and laparoscopic surgeries are minimally invasive(key-hole), there are key differences:

- Robotic instruments enable better movement in many directions.
- Robotic instruments can get to small, difficult to reach areas of the body.
- Robotic instruments are easier to control when doing very fine, precise work (reducing the risk of human error)
- Robotic systems provide a three-dimensional view, enhancing depth perception, whereas laparoscopic surgery typically involves two-dimensional imaging.
- Robotic surgery allows the surgeon to sit comfortably at a console, controlling the instruments with ergonomic movements, while laparoscopic surgery requires the surgeon to stand and directly manipulate the instruments.

### What are the alternatives to robotic assisted surgery?

Most gynaecological operations can be performed through conventional laparoscopic (key-hole) or open abdominal routes (cut on the tummy). Some operations can also be performed vaginally (through the vagina).

Your gynaecologist will discuss with you the most appropriate route of surgery for your operation and the risks and benefits of each of the options.

### Are there any mechanical issues with the robot?

These are very rare, and the robot is monitored by Intuitive Surgery during your operation. This enables any issues to be identified and rectified. If an issue were to occur that could not be resolved, the robotic instruments are removed, and the surgery performed through open or standard key-hole surgery.

### Can I have same day discharge post robotic assisted gynaecological surgery?

Your gynaecologist will discuss if a same day discharge is suitable for you.

### There are advantages to going home on the same day of your surgery:

- Faster recovery. In carefully selected people, same day discharge robotic assisted surgery is associated with quicker recovery and return to normal daily activities when compared with staying in hospital.
- Less likely to develop blood clots in your legs and lungs.
- Less likely to get a hospital acquired infection such as MRSA. There is also less likelihood of hospital acquired COVID-19.
- Recovering at home often feels better than recovering in hospital with more freedom in when you take your pain relief, eat etc. and in a familiar environment. Additionally, hospitals can be noisier during the nights and are unfamiliar places which can affect sleep that is important during recovery.

 Your surgeon and anaesthetist may feel that you are suitable for the same day discharge and discuss this with you.

Below are reasons why you might be suitable for same day discharge:

- You are happy for day case surgery.
- You have physical and emotional support at home for the first 24-48 hours after surgery.
- Your BMI is less than 40.
- You do not have current alcohol or drug dependence.
- You do not have a current or past medical condition or anaesthetic problems that require additional monitoring in the hospital after the surgery.
- You have not had past complex abdominal surgery and this planned surgery is not anticipated to be complex.
- You do not have a history of difficulty controlling pain and can take tablet pain relief at home.
- Your pre-assessment check does not raise concerns about offering you the same day discharge.
- Your surgery went well, with no complications and with minimal blood loss (< 500 ml).</li>

#### **Contact us**

Leeds Centre for Women's Health (Ward 24 St James's University Hospital)

• Gynaecology Acute Treatment Unit, Telephone: 0113 206 5724 (24 hours).

Questions / Notes	






## What did you think of your care? Scan the QR code or visit bit.ly/nhsleedsfft Your views matter



© The Leeds Teaching Hospitals NHS Trust • 1st edition (Ver 1) Developed by Maher Alazizi, Specialty Registrar and James Tibbott, Consultant Gynaecologist.

Produced by: Medical Illustration Services • MID code: M20240110\_009/MH

LN005784 Publication date 04/2024 Review date 04/2027