Robotic approach for colorectal endometriosis: a good option?

T. Hebert [1], H. Marret[1]

[1] Department of Gynaecology, Centre Olympe de Gouges, University Hospital Centre, Tours, France

Correspondance: t.hebert@chu-tours.fr

Background:
Surgical treatment of Deep Infiltrating Endometriosis (DIE) is complex and often challenging, especially concerning the colorectal involvement. Minimally invasive approach is considered to be the gold standard for complete DIE excision in skilled hands.
Robotic enhanced surgery, improving vision, forceps mobility and surgeons comfort seems to be perfectly adapted to manage these complex and time consuming procedures.

Methods:
From January 2011 to January 2013, We performed 20 Robotic enhanced laparoscopic complete excision of DIE with colorectal involvement.
All clinical datas were prospectively collected.
All patient were interviewed preoperatively, 2 and 6 Months post operatively on endometriosis related symptoms which where evaluated with a visual analogic scale.
Pregnancy desire and post operative pregnancy were collected.

Results
Eight patient underwent segmental resection, with a median endometriosis nodule of 27mm. Twelve patient underwent complete nodule debulking by colorectal wall shaving technique with a median endometriosis nodule of 19mm.
No laparotomic conversion was performed and one patient needed blood transfusion.
No other intra operative complication was observed, and particularly in the shaving technique group, no inadvertent rectal perforation was observed.
One patient had a protective colostomy for ultra low resection (2,5 cm from anal margin).
The post operative survey shows a decrease of endometriosis related symptoms.
Four out of 10 patients with a preoperative pregnancy desire became pregnant within 6 month post operatively.

Conclusion
This study confirms feasibility, low complication rates and satisfying short term results of robotic assisted laparoscopic treatment of DIE with colorectal involvement.