

Robotic surgery extends benefits to bladder cancer patients at NewYork-Presbyterian/Weill Cornell

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Robotic surgery, largely pioneered for prostate cancer surgery, is rapidly being adapted for use in other areas, including for bladder cancer patients. Urologic surgeons at NewYork-Presbyterian Hospital/Weill Cornell Medical Center now have significant experience -- and have demonstrated considerable success -- with robotics for removal of the bladder, also known as cystectomy. Their findings are published in a recent edition of the peer-reviewed publication, the *British Journal of Urology-International*.

Led by NewYork-Presbyterian/Weill Cornell's Dr. Douglas Scherr, the study shows that the robotic approach provides similar benefits to prostate resection, including dramatically faster recoveries with equal, or better, surgical precision. Specifically, robotic cystectomy patients have an average hospital stay of five days, compared with eight days for the standard open bladder surgery.

During the procedure, which makes use of Intuitive Surgical's da Vinci® Surgical System, the surgeon makes five to six small incisions in the abdomen, through which surgical instruments and a tiny stereoscopic camera are inserted. Once the bladder is removed, the surgeon creates a new channel for urine to pass from the body.

"While we are only beginning to collect long-term empirical data for the bladder, there are early indications that the surgery is at least as good as

open surgery at removing cancer," says Dr. Scherr, who has performed more than 100 of the procedures -- believed to be among the highest volume anywhere. "Our research found that patients treated with robotic surgery had just as good a cancer outcome as those individuals treated at the same center with traditional open surgery."

"Robotics appears to be superior to the standard open technique in selected cases of bladder cancer, and based on results to date, there is every reason to expect the long-term data to show it to have advantages such as reduced recovery time," adds Dr. Scherr, who is clinical director of urologic oncology at NewYork-Presbyterian Hospital/Weill Cornell Medical Center and the Ronald Stanton Clinical Scholar in Urology and associate professor of urology at Weill Cornell Medical College.

Dr. Scherr and his team at NewYork-Presbyterian/Weill Cornell have transformed the care of bladder cancer patients by offering a comprehensive minimally invasive care program. They have been able to perform total urinary reconstruction with neobladders using the robotic approach. In addition, robotic surgery provides the precision necessary to perform a nerve-sparing operation so men can enjoy normal sexual function following surgery. Both men and women have shown great benefit from robotic surgery, which is evidenced by less need for blood transfusion, less pain, shorter hospital stay, improved return in bowel function, and an overall significant reduction in complications compared with the open approach.

Surgery is one part of a comprehensive treatment program for bladder cancer patients offered at NewYork-Presbyterian/Weill Cornell.

Source: New York- Presbyterian Hospital/Weill Cornell Medical Center/Weill Cornell Medical College

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