

were passed and the ureteral plate was anastomosed. Bowel continuity was restored using two endostaplers. A permanent catheter was inserted via the urethra into the pelvis as a drain. The distal end of the conduit was pulled out through the assistant port incision, and urostomy was performed.

Results: The surgery was carried out using the Da Vinci Xi system, with robotic 8-mm ports placed in the transverse line approximately 3 cm above the umbilicus (see the resulting image at the end of the video) and a 12-mm assistant port in the anticipated stoma site.

The duration of the procedure was 5.5 hours, with a blood loss of no more than 100 mL and an ICU stay of 4 days; bowel motility was restored on postoperative day 2; the drain was left in place for 48 hours and ureteral catheters for 14 days. The postoperative course was complicated by prolonged serous secretion from the vagina that resolved spontaneously on postoperative day 18. Histologically, no viable tumour was detected in the entire bladder.

Conclusion: Robotic-assisted radical cystectomy is a safe procedure with a number of benefits for the patient. An excellent view of the confined pelvic space allows for a precise tissue dissection and blood loss reduction. Specimen removal through the vagina makes it possible for the procedure to be performed without the use of minilaparotomy. This effectively inhibits secondary wound healing due to increased lymphatic flow from the interrupted lymphatics after pelvic lymphadenectomy. Intracorporeal construction of the diversion allows for the procedure to be done without traumatizing the bowel by opening the peritoneal cavity, thus effectively preventing the development of postoperative paralytic ileus. On the contrary, a drain passed through the urethra proved to be a factor predisposing to prolonged serous secretion from the urethra.

KEY WORDS

Robotic assisted radical cystectomy, female, intracorporeal construction of ureteroileostomy.



Soutěž ČUS



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Následně budou výsledky zveřejněny v časopisu Česká urologie a na webových stránkách ČUS.