

## Robotically assisted hysterectomy for staging endometrial cancer: Experience at a tertiary care institution in India

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**CONTEXT:** Conventional open hysterectomy via laparotomy (TAH) in women with endometrial cancer is associated with increased morbidity. Robotic surgery, leading to a healthier post-operative life, quicker healing of wounds, lower infections and shorter hospital stay has gained popularity in Asia.

**OBJECTIVE:** To evaluate women with endometrial cancer who underwent robotic hysterectomy at our institution. Further the perioperative course of these patients was compared to those staged by conventional laparotomy.

**METHODS:** The da Vinci Xi robotic surgical platform was used in all cases of robotic hysterectomy. All procedures were performed by one attending gynecologic surgeon experienced in advanced laparoscopic surgery who had performed more than 50 TRH before the beginning of this study.

**MAIN OUTCOME MEASURES:** Records were reviewed for demographic data and perioperative outcomes. Data of the two groups was compared using t test.

**RESULTS:** One hundred and fifty women underwent endometrial cancer surgery: seventy-five each by robotic technique (TRH) and by laparotomy (TAH). Demographics of the TRH cohort (mean age:  $58.1 \pm 12.1$  yrs, parity: 2.7, BMI:  $27.7 \pm 3.7$ ) and the TAH cohort (mean age:  $61.4 \pm 8.9$  yrs, parity: 1.5, BMI:  $26.5 \pm 3.8$ ) were comparable. Intraoperative blood loss and operative time was lower with TRH ( $28.6 \pm 17.6$  mL and  $132 \pm 57.8$  mins vs.  $191.2 \pm 46.1$  mL and  $194 \pm 63.3$  mins. respectively;  $p < .0001$ ,  $< 0.01$ ) Postoperative complication rates were lower for TRH, compared with TAH (5.9% vs. 29.7%;  $P < .0001$ ). No patient of TRH was converted to laparotomy. Time for ambulation and return to daily activity was faster with TRH. Analgesic use and hospital stay was also less for TRH group.

**CONCLUSION:** TRH is a useful minimally invasive technology to stage women with endometrial cancer. Long term data is needed to determine survival outcomes in these women.

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