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Single Port Laparoscopy Nephrectomy and Adrenalectomy: Initial Experience with Multichannel Trocar

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Background: Laparoscopic surgery is a valid alternative to open surgery, with great benefits on postoperative pain, cosmesis, hospital stay, and convalescence. Current efforts are aimed at further reducing the morbidity associated with minimally invasive surgery. Recently, new devices are introduced in order to further reduce the surgical scar and morbidity. Aim of this study is to find out whether the single port laparoscopic surgery (SPLS) is feasible and safe.
Material and Methods: We describe the first two Italian kinds of interventions with the Triport single-trocar systems device (Advanced Surgical Concepts, Wicklow, Ireland). One left nephrectomy for non-functioning kidneys and one left adrenalectomy for adenoma were done. In all cases we inserted the single multilumen trocar as described by the manufacturer and completed the procedures using articulating instruments (dissector and scissor, ROTICULATOR ENDO^{TM} Covidien Ltd., Norwalk, CT). These devices allowed us to complete the procedures with a satisfying triangulation. Patient demographics, peri-operative, haematological, pathological data, and pain assessment using Visual Analog Pain Scale (VAPS) were assessed.
Results: All interventions were completed successfully without complications. The mean hospital stay was 3 days. The surgical scar was very small (5–6 cm). A postoperative not clinically significant haemoglobin level reduction was recorded (mean 1.2 ± 0.6 g/dl). Minimal pain was noted at discharge (VAPS: 1.3 ± 0.9). Pathology confirmed the preoperative findings.
Conclusion: This is the first Italian experience with Triport SPLS. In our opinion SPLS is technically more challenging than standard straight laparoscopy and requires specific articulating instruments, although it is feasible and safe in selected patients.

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