

Oral with video Presentation

Robotic Laparoscopic Assisted Nerve-Sparing Radical Hysterectomy –A
case presentation

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Background and aims: To present a case of robotics laparoscopic assisted nerve-sparing radical hysterectomy.

Case report: A 37-year-old, G2P2, housewife without regular pap smear suffered intermittent vaginal bleeding for two months. She went to clinic for help and pathology of cervical biopsy was adenocarcinoma in situ. Then she was referred to tertiary hospital. At our OPD, pervaginal examination revealed necrotic mass about two cm with contact bleeding at posterior cervix and free parametrium. The colposcopic biopsy reported adenocarcinoma. CT scan disclosed tumor mass in cervix and no enlarged lymph node of pelvis or para-aortic. Her CEA(EIA) was 1.91 ng/mL and CA-125(EIA) was 17.5 U/mL. Then, she accepted the robotic laparoscopic assisted nerve-sparing radical hysterectomy, bilateral pelvic lymph node dissection and bilateral ovarian transposition and the operative course was smooth. The operation time was 5 hours and 30 min and blood loss was 50ml. Patient urinated and defecated smoothly on the second day after operation and discharged three days after operation. The final pathology showed free resection margin and no parametrium involved. The residual volume of urine was less than 50ml 10 days after operation.

Conclusion : Robotics laparoscopic assisted nerve-sparing radical hysterectomy. is a feasible technique for reserving bladder function in treating patient with cervical cancer.