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JOINT EVENT

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Ambulatory laparoscopic surgery, is it feasible? 7 years clinical experience

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Objectives: Laparoscopic procedures are becoming routine and common. Patients who need simple and short time procedures enjoy shorter hospital stays and quicker recovery times. These procedures have progressed to an ambulatory procedure. We present 7 years' experience (Jan 2010-Dec 2016) ambulatory laparoscopic surgery, several cases lower abdominal laparoscopic surgery (high vasoligation varicocelectomy), inguinal hernia repair TAPP, cystectomy, ovarectomy and adhesion release), and underwent by loco regional anesthesia.

Methods: Between Jan 2010 to Dec 2016, 498 patients underwent ambulatory laparoscopic surgery (high ligation varicocelectomy: 412 patients, inguinal hernia repair TAPP: 53 patients, abdominal pain due to adhesion to abdominal wall:17 patients, cystectomy: 14 patients, bilateral ovarectomy: 2 patients), ASA I –II, underwent by loco regional anesthesia (Spinal block, sedation (midazolam) and analgesia (morphin/fentanyl)), spinal anesthesia level VL (video laparoscopy) III-IV, spinocan 29G with blocked target VTh IV-V, using low pressure CO2 (10-12 mmHg) pneumoperitoneum.

Results: There were 3 patients admitted for observation, due to bradycardia, hypotension and PONV (Postoperative nausea and vomiting). There was neither conversion from spinal to general anesthesia nor to opened surgery. Age: 17-48 years (average 21 years), sex: male 463, female 35, defects; varicocele: unilateral 345, bilateral 67, Inguinal hernia: unilateral 51, bilateral 2, operating time: 15-60 minutes (average 30 minutes), no postural headache and urine retention was found, cost effective: 40-50% lower.

Conclusions: Ambulatory laparoscopic surgery is feasible and safe under regional anesthesia and more cost effective. Further studies are required to validate this technique.

Biography

Alexander Surya Agung is the Head of Surgery Department at Bhayangkara Police Hospital in Surabaya Indonesia. He completed his Medical Doctor and General Surgeon at Airlangga University, Surabaya Indonesia. He is interested in minimally invasive surgery and has attended courses in Singapore, India, Taiwan and Philippines. He is a Member of ISES, Indonesian Society of Endolaparoscopic Surgery, Indonesian Hernia Society, Endoscopic and Laparoscopic Surgeon of Asia, Asia Pacific Hernia Society and European Association for Endoscopic Surgery.

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