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## Evidence based mini-laparoscopy - Small instruments, big surgeries

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**Background:** Stigmatized as expensive, time consuming and complicated, mini-laparoscopic surgery seemed to have no major advantages and did not progress the way industry had imagined. In Brazil, with various adjustments in the MINI original technique, several procedures have been developed where great results are achieved using simple and more reliable mini low friction reusable instruments.

**New MINI instruments:** In order to improve movement precision and decrease surgical stress, a no seal and no valve trocar (low-friction) was developed, minimizing usual friction forces. The special MINI trocar was designed to resemble a long needle, matching the diameter of the corresponding 3mm instruments. Free left lumen is minimal, therefore eliminating the need for sealing to prevent gas loss. The long trocar dilating tip significantly improves cosmesis, while prevents dislocation of the cannula even in thin patients and emphasizes the idea of a less scar and less trauma approach.

**MINI cliplless cholecystectomy:** The problems of the MINI optics were solved by simply not using it. Knots are tied to the cystic duct and the cystic artery is cauterized. This technique has been described in detail in a publication of 1000 cases without mortality, conversion to open surgery or common bile duct injuries. In order to avoid the use of mini-scopes, gallbladders were removed in bags and most of the cases were discharged in less than 24h with virtually no pain.

**MINI inguinal hernia repair:** The hybrid mini-laparoscopic TEP-TAPP, combining features and advantages of each technique with the delicacy and precision of the MINI instruments, appears simple, safe and versatile. Reducing costs since this technique obviates the need for using balloon dissection and mesh fixation. A reduced learning curve can also be found since mini preperitoneal dissection allows faster and easier creation of the preperitoneal space.

**Conclusion:** Other MINI advanced endoscopic procedures have also been regularly performed in Brazil, including thorax and lumbar sympathectomies, trans-anal endoscopic operations (TEO), Nissens, appendectomies, adrenalectomies, right and left colectomies, splenectomies, lymphadenectomies, bile ducts explorations and reconstructions, not to mention several gynecological and urological procedures. In short, cheaper is not necessarily worse and recognized benefits were found in the Brazilian MINI technique which is a 1-day surgery, safe, with all the advantages of laparoscopy, highly reproducible, cost effective and with great aesthetic appeal.

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