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## Advanced laparoscopic surgical management of biliary and pancreatic disease: An overview

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Diseases of the biliary system and pancreas like all other organs range from simple to complex disorders and can be benign or malignant. They could vary from a simple cyst to periampullary carcinoma and pancreatic head malignancies. Traditionally the management of these disorders has been by conventional open surgery. The post operative morbidity has been reported to be high and there is a significant mortality too. Certain disorders like infected pancreatic necrosis requiring necrosectomy usually have a poor prognosis. The large incisions and blood loss and post operative pain add to the morbidity of the disease. The introduction of laparoscopic surgery is a boon to the surgical field. The procedures which are performed by open surgery can be done as good if not better by laparoscopy. The morbidity and mortality are greatly reduced. Procedures such as Puestows and Whipples done by open surgery have a significant post operative morbidity. All these major pancreatic surgeries can nowadays be done by laparoscopic and robotic surgery. The use of minimal access technique in the management of pancreatic and biliary diseases greatly reduces the post operative morbidity and mortality. However significant expertise and experience is required for the performance of these procedures.

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## Single incision laparoscopic surgery: Principles and practices

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Single Incision Laparoscopic Surgery (SILS) is a new age laparoscopic technique where laparoscopic surgery will be performed through a single port rather than three or more ports as in conventional laparoscopy. Though it had initial popularity, it failed to impress the surgical community due to its ergonomic difficulty. Feasibility of various procedures is tried in multiple centers and the ergonomics are modified accordingly. Although results are similar to laparoscopy, SILS has its limitations like not possible for all laparoscopic surgeries with the present available instruments, more time consuming, difficult traction techniques and ergonomic limitations. However, early results are promising under technically strong hands and it is already proved beneficial in few procedures like fundoplication, hysterectomy, splenectomy, sleeve gastrectomy, etc. Various ergonomic and instrument modifications are tried and postulated for the same including numerous ports to enhance the performance. However, ergonomic modifications in line with the principles of laparoscopy and instrumentation are mandatory for effective performance. With the recommendations of ergonomic modifications and liver and organ transplantation techniques as per authors experience and research, even complex advanced minimal access surgeries like gastrectomy, colectomy, gastric bypass, etc can be achieved by SILS technique. The recommendations include the ideal SILS port, instruments, planes of instrumentation for dissection and manipulation during the procedures. With the possibility of more new generation instruments to come, SILS is all set to replace laparoscopy in selected cases. However, long term multi-centric studies are required to prove the advantages over conventional laparoscopy.

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