LA ROCHELLE CLINIC EXPERIENCE IN SINGLE PORT SACROCOLPOPEXIES (LESS)
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Introduction: We have been performing transumbilical LESS sacrocolpopexies for a year representing 27 procedures and we’ll describe here our technique and results.

Methods: The single port is introduced into a 25mm umbilical incision and we only use standard instruments and a rigid 0°/10mm laparoscope. The sacrocolpopexy is performed as we used to do in standard laparoscopy. Dissection of the sacral promontory at first, then the posterior mesh is fixed to the levator ani using tackers. The anterior mesh is sutured with extracorporeal knot tying and the tail end of the two meshes is fixed to the promontory using tackers. Recently we stopped using tackers and now knots are made intra or extra corporeally. All the peritoneal incisions are closed using running sutures. The abdominal wall is repaired with an excellent view. The final scar is hidden in the umbilical natural scar.

Results: Mean age of the patients is 60.5 (39-73) and mean BMI is 25 (21-32). Blood loss is not significant. The mean operative time is 127min (86 – 205) and means hospital stay is 3.1 days (2-5). Mean operative time is rapidly decreasing with experience and still decreasing. Operative time is nevertheless longer due to the difficulty to perform this reconstructive procedure. We do not report any complications, failure or recurrence.

Conclusion: Umbilical LESS procedures create a single hidden scar with an immediate excellent cosmetic result. The patients express complete satisfaction. This technique is safe but should be reserved to experienced laparoscopists.