INTRODUCTION: With the advent of robotic surgery, application of open surgical principles is increasingly translated to the minimally invasive laparoscopic approach.

OBJECTIVES: We examined the learning curve for the robot sacrocolpopexy (RS) as defined by operative times, mesh erosion and prolapse recurrence.

METHODS: From 2002 to 2008, 53 consecutive females with symptomatic high-grade post-hysterectomy vaginal vault prolapse underwent RS in the Department of Urology by one surgical team. OR times and post-operative complications were collected prospectively along with patient demographics. A linear regression model was used to predict a learning curve in sequential cases.

RESULTS: With an average follow-up of 35.8 months (range 1.4 to 67), 48 females, with an average age of 66 years underwent RS (5 conversions to open). Significant improvement in complication rates were identified after completion of 12 cases and 24 cases, after which no complications were noted.

CONCLUSIONS: A decrease in OR time and post-operative complications is evident with more cases of RS, regardless of patient age, when performed by one surgical team.