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SLS NOW

Where Disciplines Meet



MIS Week
September 25-28, 2024





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This Newsletter is Interactive. Look for the



A MESSAGE FROM THE

President

Dr. Radha Syed



Hello, everyone!

It's an exciting time ahead as I embark on my tenure as the President of SLS for 2023-2024. I'm aware of the immense responsibility that comes with following in the footsteps of giants who preceded me.

A significant portion of my professional journey has been dedicated to learning Minimally Invasive Gynecologic Surgery (MIGS). I've spent years organizing conferences and skills labs, collaborating with innovators in MIGS across the US and globally. The heydays of laparoscopic surgery in the 1990s were transformative. However, during that period, gynecologists lagged behind general surgeons who were rapidly advancing with LapCholes and Appys.

When bleeding became uncontrollable, conventional methods sometimes fell short, necessitating the need to revert to open surgeries. Mastery of suturing became imperative during this 'gold rush' era, leading to a surge in hands-on suturing conferences. Then came surgical robotics, revolutionizing the landscape by allowing surgeons to perform intuitive suturing similar to 'open' cases, mitigating the challenges posed by laparoscopic surgery.

The introduction of robotic surgery, provided a more familiar and user-friendly approach, especially for gyn oncologists and others uncomfortable with the counter-intuitive motions in laparoscopic surgery. However, mastering laparoscopic techniques was fundamental to safely performing robotic surgery, which initially posed challenges due to its cumbersome docking platform and associated injuries. Subsequent advancements in robotic platforms improved docking ease, reduced OR time, and minimized staff training efforts, leading to the classification of two MIGS groups: laparoscopic surgeons and robotic surgeons, with some crossover.

The preference for robotic surgery among gyn oncologists stemmed from the need for pelvic node dissection and complexities of certain cases. As someone who persisted with laparoscopic surgery despite being less favored for robotic OR time, I continue to perform mainstream MIGS utilizing the most available resources, instruments, and assistants, aiming for efficiency.

In teaching my residents, I emphasize reproductive fertility-preserving surgeries for conditions like endometriosis and fibroids, combining conventional Lap Hysterectomy with significant vaginal surgery. Additionally, I incorporate laparoscopic-assisted myomectomy, utilizing MINILAP assistance for the safe removal of large masses—a hybrid approach. Dr. Camran Nezhat's words often resonate in the operating room, reminding us that there's more than one way to achieve a goal—similar to various methods of playing a piano.

To all those navigating the ever-evolving realm of surgery, especially during this festive season, I wish you Happy Holidays and a prosperous New Year in 2024!

Join us during the MIS Week from September 25-28, 2024, at Lake Buena Vista Disney Springs, Florida. The Society of Laparoscopic & Robotic Surgeons eagerly awaits to share the latest updates in surgical technology and techniques, aiding in your journey to becoming a more adept surgeon.

Best Regards,
Radha Syed, MD, FACOG

Article

Spotlight

JLS

JLS 2023 Jul -Sep;27(3)
e2023.00025

Robo-Lap Approach Optimizes Intraoperative Outcomes in Robotic Left and Right Hepatectomy

Francesca Ratti 1 2, Rebecca Marino 1 2, Sara Ingallinella 1 2, Lucrezia Clocchiatti 1 2, Diletta Corallino 1 2, Marco Catena 1 2, Luca Aldrighetti 1 2

Review Article



Abstract

Background: The aim of the present study is to evaluate the possible advantages of the Robo-Lap (parenchymal transection by laparoscopic ultrasonic dissector and robotic bipolar forceps and scissors) compared with pure robotic technique (parenchymal transection by use of robotic bipolar forceps and scissors) in major anatomical liver resections with specific focus on intraoperative outcomes.

Methods: Major liver resections performed by robotic approach between February 1, 2021 and March 31, 2023 were stratified into two groups according to the approach used to address the phase of liver transection; Pure Robotic Group (n = 21) versus Robo-Lap Group (n = 48). The two groups were compared in terms of intra- and postoperative outcomes and in terms of rate of achievement of intraoperative textbook outcomes.

Results: Conversion rate was similar between the two groups while incidence of adverse intraoperative events (according to Satava classification) was higher in the Pure Robotic compared with the Robo-Lap group (85.7% vs 39.6%, $p < 0.001$). Time to perform parenchymal transection was significantly shorter in the Robo-Lap group (180 min) compared with the Pure Robotic Group (240 min), $p = 0.003$. Intraoperative textbook outcomes were achieved in a lower proportion of patients in the Pure Robotic compared with the Robo-Lap group.

Conclusion: Outcomes of the present study suggest a favorable role of the Robo-Lap approach in robotic major resections as it allows an improvement of the intraoperative results, a greater probability of an uneventful conduction of the procedure, and therefore, better management of the operating room time.

The minimally invasive approach has gained a main role in the setting of liver surgery due to well-documented perioperative advantages for the patient and to maintained oncological efficacy compared with the open approach.^{1–4} This evolution has been supported by the progressive technical and technological improvement that occurred over the course of the past 20 years.^{5,6} Furthermore, the encouraging outcomes of minimally invasive liver Surgery (MILS) have constituted an incentive for technological investment to overcome technical difficulties initially described in this area. Today it is possible to perform procedures with a high degree of difficulty due to the availability of operating theaters equipped with advanced instrumentation and specifically designed to meet the needs and tasks of liver surgery.^{7,8} However, the robotic approach has spread more slowly and with latency compared with laparoscopy.⁹ The list of possible reasons for this

delay includes the still irregular and low diffusion of the platform, the reduced availability of time slots dedicated to robotic liver surgery, and also the dissatisfaction of liver surgeons regarding the availability of instruments for precise and accurate parenchymal transection.

In a recent survey on the implementation of MILS, the most used transection technique in robotic liver surgery includes the combination of bipolar forceps (used in a Kellyclasia-like fashion, i.e. clamp-crushing) associated with monopolar scissors. The lack of an ultrasonic dissector is reported as the main concern for a large-scale implementation of robotic liver surgery.⁹ To meet the need for thorough parenchymal dissection without renouncing to the advantages provided by the dexterity of the robotic technique, a hybrid technique (Robo-Lap approach) has been described.....



JSLS, Journal of the Society of Laparoscopic & Robotic Surgeons is the multispecialty, peer-reviewed journal of the Society of Laparoscopic & Robotic Surgeons.

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Meet the MISWeek 2023

Best of Award Winners

The Medical Educator Consortium Award for Best Scientific Paper

Seong Hoon Kim, MD
Comparison of Various Thyroidectomy Approaches: A Retrospective Cross-Sectional Study

Michael S. Kavic Award for Best Scientific Paper by a Resident

Patryk Piekos, MD
Meta-analysis of the Prevalence of Uterine Artery Origin Variation and its Clinical Significance

Paul Alan Wetter Award for Best Multispecialty Scientific Paper

Claire Dalby, BA
Effects of Preoperative Diabetes Mellitus on Postoperative Outcomes after Robotic-Assisted Video - Thoracoscopic Pulmonary Lobectomy

Harrith M. Hasson Award for Best Presentation Promoting Education or Training

Mohammed Elniel, MB ChB
Difficult Cholecystectomy – Getting It Right First Time

Carl J. Levinson Award for Best Video

Emanuel Shapera, MD
Robotic Common Bile Duct Excision and Roux-en-Y Hepaticojejunostomy with Anterior Right Hepatic Artery and Separate Right Posterior Duct Drainage

Best Multispecialty Video

Humara Edell, MD
Endoscopic Resection of Cervical Cerclage Eroded through the Bladder

Best General Surgery Video

Allyson Lim-Dy, BS
Delayed Repair of E2 Bile Duct Injury with Robotic Roux-en-Y-Hepaticojejunostomy

Best Urology Video

Christopher Connors, BA
Modified Approach to Robotic-assisted Penile Inversion Peritoneal Flap Vaginoplasty

Best Gynecology Video

Bruce Lee MD
Robotic-Assisted Laparoscopic Removal of Retained Suture Needle in an Obliterated Anterior and Posterior Cul de Sac

Gustavo Stringel Award for Best Poster

Denise Nemeth, DO
Minimizing the Invasiveness: A Case Report on the Advantages of Minimally Invasive Aortic Valve Replacement While Enhancing Patient Experience

Gustavo Stringel Award for Best Poster by a Resident

Xixi Cao, MD PhD
Accurate Localization of Mesenteric Mass Using Near Infrared-Guided Robotic Surgery: Emerging Applications in General Surgery

Gustavo Stringel Award for Best Poster by a Student

Tara Ranjbar, BS
Pylorus-Preserving Pancreaticoduodenectomy and Bile Duct Resection in Prep to Transplant for a Type IVa Choledochal Cyst

Best General Surgery Scientific Paper

Sundarachalam Pindicura, MD
Comparing Outcomes of Gastrojejunal Anastomosis Technique in Laparoscopic Roux-en-Y Gastric Bypass: Linear GIA vs Circular EEA

Best Urology Scientific Paper

Eric Monnet, DVM, PhD
Canine Radical Prostatectomy: A Model to Teach Robotic Radical Prostatectomy

Best Gynecology Scientific Paper

Kacey Hamilton, MD
Risk Factors for Major Complications Following Colorectal Resections for Endometriosis Across the United States

Snapshots of MISWeek 2023





CALL FOR *Abstracts*

You are invited to submit scientific paper, video and poster abstracts for presentation at MISWeek 2024

Submissions open December 15th, 2023

Awards	Prize
The Medical Educator Consortium Award for Best Scientific Paper	\$1200
Paul Alan Wetter Award for Best Multispeciality Scientific Paper	\$500
Michael S. Kavic Award for Best Scientific Paper by a Resident	\$1000
Carl J. Levinson Award for best Video	\$500
Harrith M. Hasson Award fir best Presentation Promoting Education and Training	\$500
Gustavo Stringel Award for Best Pediatric Surgery Presentation	\$500
Gustavo Stringel Award for Best Poster	\$500
Gustavo Stringel Award for Best Poster by a Resident	\$250
Gustavo Stringel Award for Best Pediatric Surgery Presentation	\$250

Certificates will be issued for the following:

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- Best General Surgery Video
- Best Gynecology Scientific Paper
- Best Gynecology Video
- Best Urology Scientific Paper
- Best Urology Video
- Best Multispecialty Video

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MISWeek 2024

*Preliminary Agenda**

WED
25
SEPT

7:00am - 8:00pm Conference Registration
Complimentary Coffee & Bakery Items
Hands On Courses
Suturing Skills Course:
Advanced Laparoscopic Suturing - For the Gynecologist, Urologist and General and Robotic Surgeon
Hysteroscopy/Office-Based Hysteroscopy Skills Course:
Minilaparoscopy Skills Course
Simulation Skills Course
Office Pain Procedures Skills Course
Didactic Master Course
Updates in Robotics and Robotically-assisted Surgery (4 Hrs.)
Opening Ceremony
Welcome Reception in Exhibit Hall

THUR
26
SEPT

7:00am - 5:00pm Conference Registration
Complimentary Coffee & Bakery Items/Product Presentations by Exhibitors
Highlights
Multidisciplinary Plenary Session:
Artificial Intelligence: Implications and Indications in MIS Surgery and Robotics
Multidisciplinary Plenary Session:
The Global Reach of Telesurgery
Refreshment Break/Visit Exhibits/Product Presentations by Exhibitors
Didactic Lectures
Refreshment Break /Visit Exhibits/Product Presentations by Exhibitors
Concurrent Presentation Sessions: Scientific Papers/Videos
Global Perspective in MIS
Special Event: Fellows, Residents & New Members Meet & Greet

FRI
27
SEPT

7:00am - 5:00pm Conference Registration
Refreshment Break /Visit Exhibits/Product Presentations by Exhibitors
Exhibit Hall and Poster Gallery Open
Highlights
Multidisciplinary Plenary Session: *Building Health Equity: Making Surgery Accessible in Low Resource Environments*
Multidisciplinary Plenary Session: *Healing Hands, Breaking Barriers: Transforming the Face of Surgery*
Presentation of Gustavo Stringel Best Poster Awards
Refreshment Break /Visit Exhibits/Product Presentations by Exhibitors
Refreshment Break /Visit Exhibits/Product Presentations by Exhibitors
Global Perspectives in MIS
Concurrent Presentation Sessions: Scientific Papers/Videos

SAT
28
SEPT

7:00am - 5:00pm Conference Registration
Highlights
Breakfast with 2023 Excel Award Recipient
Janis Chinnock Wetter Award
Future Technology Session with Keynote Speaker: Eric Haseltine, PhD
Predicting The Future: Envisioning Collisions Between Fast Changing Technology and Unchanging Human Nature



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INNOVATION OF THE YEAR

2023

STIMSITE™

SLS recognizes the most innovative products of the past year that have a multidisciplinary application in minimally invasive surgery. Innovations of the Year are announced at SLS' Minimally Invasive Surgery Week 2023 (MISWeek 2023). These products are selected to recognize excellence in innovation. SLS does not endorse or approve any products and these selections are provided solely for informational purposes. Surgeons should investigate any new equipment for safety and suitability for their particular practice and needs.

The Society of Laparoscopic and Robotic Surgeons was established as an educational, non-profit organization to help ensure the highest standards for the practice of laparoscopic, endoscopic and minimally invasive surgery. The Society serves surgeons from various specialties and other health professionals who are interested in advancing their expertise in the diagnostic and therapeutic uses of laparoscopic, endoscopic, robotic, and minimally invasive surgical techniques. With its global membership, SLS offers a unique approach to the study and education of minimally invasive surgery by bringing together different medical specialties who use the techniques and tools of minimally invasive surgery.

We congratulate
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on their
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for the StimSite.
Presented at
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*Director: Camran Nezhat, MD
Palo Alto, CA*

Fellowship in Minimally Invasive and Robotic Surgery in Gynecology and Reproductive Surgery
*Director: Ceana Nezhat, MD
Atlanta, GA*

Fellowship in Minimally Invasive and Robotic Surgery in Gynecologic Benign and Malignant Pathologies
*Director: Farr Nezhat, MD
Long Island, NY*

Marchand Institute for Minimally Invasive Surgery & Steward Health Mountain Vista Medical Center Affiliated Fellowship Program in Minimally Invasive and Robotic Gynecologic Surgery
*Director: Greg J. Marchand, MD
Mesa, AZ*

SLS Fellowship in Advanced Endometriosis
*Director: Tamer Seckin MD
New York, NY*

Minimally Invasive Gynecologic Surgery Fellowship (FMIGS) of South Florida
*Director: Emery Salom, MD
Miramar, FL*

GENERAL SURGERY

SLS Fellowship in Advanced Minimally Invasive and Endoscopic Techniques in General and Colorectal Surgery
*Director: Jiri (George) Melich, MD
Vancouver, BC, Canada*

Florida Surgical Specialists Enhanced General Surgery Fellowship: Advanced Laparoscopic and Robotic Foregut, Hernia, and Colorectal Fellowship
*Director: Paul Toomey, MD
Bradenton, FL*

SIMULATION

Carlos Pellegrini and Brant Oelschlager Surgical Simulation Fellowship
*Director: Robert Sweet, MD
Seattle, WA*

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The Fellow will also work side by side with the Preceptor and other designated members of the Fellowship training team in the office and observe in the operating room. Academic activities such as research, simulation training, publications, presentations and teaching junior staff will be required. Additionally, the fellow will work on curriculum development, research and personal skill building. By the end of this fellowship, they are expected to accomplish the following goals:

CURRICULUM

During the fellowship year the fellow is generally expected to direct forty percent of their efforts toward curriculum development, forty percent toward research, and twenty percent to personal skill building.

Program Director:
Robert Sweet, MD

For more information or to apply for this position, please contact:

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2024



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Resident *	\$ 200.00	Member Only Rate
Fellow **	\$ 300.00	Member Only Rate
Affiliated Medical Personnel	\$ 300.00	Member Only Rate

Special registration rates are available for SLS MEMBER Medical Students, Residents-in-Training, Fellows-in-Training, and Affiliated Medical Personnel. To qualify for these rates to the annual meeting you must currently be a Resident, Fellow-in-Training, or Affiliated Medical Personnel MEMBER of SLS.

SLS is currently offering FREE membership to Medical Students and Residents.

Fellow-in-Training, and Affiliated Medical Personnel memberships are \$95 per calendar year.

To qualify as a Resident* or Fellow-in-Training**, you must be in training in a U.S. accredited training program or, if outside the U.S., you must be a Resident or Fellow-in-Training within the first five years after medical school degree.

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Be sure to mention that you are attending SLS's Minimally Invasive Surgery Week 2024 to receive our discounted room rates.

Rates will be honored September 25-September 28, 2024, subject to availability. does not include applicable state and local taxes.



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Guests of the resort can take advantage of the daily scheduled shuttle transportation provided to the four main Walt Disney World® Theme Parks. Reservations are required. Shuttle schedules and information are provided at check-in.

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Registration Opens March 1 2024



Conference Website

**Registration Opens
March 1, 2024**

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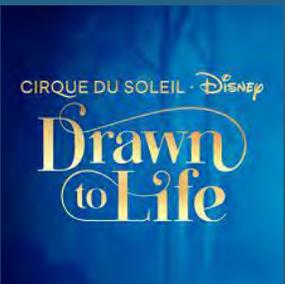
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"I have had the opportunity to become involved with the SLS. As a urologist I have found the meetings extremely informative learning from my colleagues not just in Urology but also from the fields of General Surgery and Gynecology. MISWeek is the best collaborative meeting I have attended. Not only is the learning portion of the meeting exceptional but the people I have met nationally and internationally are truly professional whom I consider great friends as well."

- Michael McDonald, MD

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- Have your successes featured in "Members in the News"

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- Subscription to *CRSLS, Case Reports Journal of the Society of Laparoscopic & Robotic Surgeons*
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