

Laparoscopic Adrenalectomy: Troublesome Cases

This video from the International Journal of Urology presents a case in laparoscopic adrenalectomy. It is part of an article with 4 videos on "Laparoscopic adrenalectomy: Troublesome cases". View the article [here](#) [1] and find the videos under Supporting Information of the article.

Abstract: Among 143 cases of laparoscopic adrenalectomy carried out from 1993 to the present, 13 patients in whom the surgical manipulation presented problems were examined. Problems occurred due to the condition of the adrenal tumors themselves in six patients, whereas problems occurred due to the operative history in four patients.

There were three patients with no operative history but with strong intraperitoneal adhesion. In patients with a history of laparotomy in other fields such as open cholecystectomy, gastrectomy or colostomy, operations were possible in most patients by examining the trocar site preoperatively. Patients with strong adhesion even without a history of surgery could be handled by full separation of the adhesion during surgery.

In patients with bleeding in the adrenal tumors, large adrenal tumors, or tumors impacted in the liver, methods such as changing the sequence of separation procedures were required. In patients with a history of renal subcapsular hematomas due to extracorporeal shock wave lithotripsy (ESWL), it was not possible to understand the conditions of adrenal or perinephritic adhesion in preoperative imaging diagnosis, but resection was possible by changing the order of separation procedures and by using optimal instruments and devices.

As with any surgery, including open surgeries, it is necessary to obtain knowledge on how to deal with variations in laparoscopic adrenalectomy to assure safe outcomes and to always consider effective methods for coping with unexpected difficulties.

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<http://www.surgicalproductsmag.com/videos/2010/03/laparoscopic-adrenalectomy-troublesome-cases>

Links:

[1] <http://www3.interscience.wiley.com/journal/122368294/abstract>