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Video of the month

Robotic repancreatectomy in a patient with previous major abdominal surgery



Repancreatectomía robótica en paciente con cirugía abdominal mayor previa

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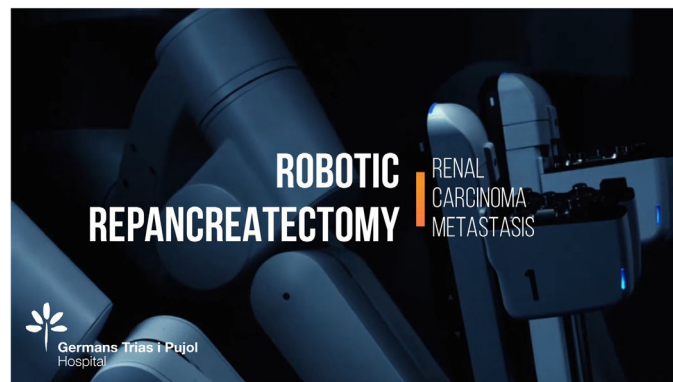


Figure 1

A 64-year-old patient with obesity and a history of clear cell renal cell carcinoma with previous surgery for right nephrectomy (laparotomy) and subsequent distal pancreatectomy with splenectomy for metastasis (left subcostal) recently presented a new metastasis in the remnant of the body of the pancreas (Fig. 1).

Despite previous abdominal surgeries, the minimally invasive (robotic) approach was considered because of its advantages, both in the immediate postoperative period (pain) and in the late postoperative period (wound infection and eventration). There were no intra- or postoperative complications.

In conclusion, this approach combines the advantages of minimally invasive surgery and the virtues of the robotic technique.

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.cireng.2023.04.018>.

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<http://dx.doi.org/10.1016/j.cireng.2023.04.018>

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