



Video of the Month

Segmental resection of the fourth duodenal portion using the Da Vinci Robot[☆]



Resección segmentaria de cuarta porción duodenal mediante Robot Da Vinci

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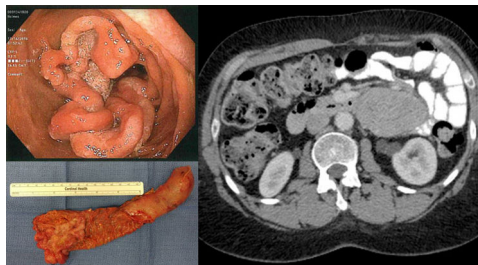


Fig. 1

Robotic surgery provides benefits over traditional or laparoscopic surgery in endoscopically unresectable duodenal lesions.

We present the case of a 66-year-old patient with a 6-cm adenoma in the fourth part of the duodenum that occupied 80% of its circumference 4 cm from the ampulla of Vater, which was detected during gastroscopy performed for gastroesophageal reflux disease (GERD). After endoscopic resection was ruled out, robotic resection of the fourth part of the duodenum was performed (after confirming the exact location with ultrasound) and side-to-side duodenojejunal anastomosis was created after duodenal uncrossing (Appendix B, Video).

The postoperative period was uneventful. Oral tolerance was reintroduced on the first day, and the patient was discharged two days later (Fig. 1).

Conflict of interests

The authors have no conflict of interests to declare.

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.ciresp.2020.05.006>.

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