Robotic Transaxillary Thyroid Lobectomy of a Follicular Neoplasm

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ABSTRACT

Purpose. Minimally invasive thyroid surgery using various techniques is well described. The purpose of this video is to show a robotic-assisted transaxillary right thyroid lobectomy for a follicular neoplasm with intraoperative nerve monitoring and stimulation of recurrent laryngeal nerve. Herein, we show our experience with the technique and its safety and feasibility.

Methods. We performed a right thyroid lobectomy on a 33-year-old patient using the da Vinci-Si-HD Surgical System. The operation was done via a single axillary incision, 5 cm in length. The flap creation time was approximately 26 min. The robot docking time was 6 min. The recurrent laryngeal nerve was identified and nerve

stimulation was used to stimulate with 0.5 milliamps. The operative console time was 21 min. Total operative time was 69 min.

Results. The procedure was successfully completed. Blood loss was minimal. Postoperative laryngoscopy showed intact and mobile bilateral vocal cords. There were no complications. Patient was discharged 4 h after surgery.

Conclusions. Robotic transaxillary endoscopic gasless thyroid surgery with monitoring and stimulation of the RLN is feasible and safe. This technique eliminates a visible neck scar and affords excellent high definition optics of the cervical anatomy. This new technique can be accomplished on an outpatient basis.

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