



ASO Author Reflections: “Modified Bascule Method” during Robot-Assisted Minimally Invasive Esophagectomy Has Potential to Decrease Recurrent Laryngeal Nerve Palsy

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PAST

For esophageal squamous cell cancer (ESCC), a few novel techniques for lymphadenectomy along the recurrent laryngeal nerve (RLN) for minimally invasive esophagectomy (MIE) have been developed.¹ Even though RLN palsy is strongly associated with pneumonia, which is an independent prognostic factor,^{2,3} the rate of RLN palsy remains high.

PRESENT

Our results revealed that the novel “modified Bascule method” for robot-assisted MIE (RAMIE), based on a logical and simple understanding of the left upper mediastinum anatomy, can promote feasible lymphadenectomy along the left RLN, even when performed during the learning period.⁴

FUTURE

Larger prospective or retrospective studies are required to validate the findings presented herein. In particular, it should be estimated whether ESCC patients’ prognosis will improve due to decrease of pneumonia by this novel procedure for RAMIE.

DISCLOSURE

Taro Oshikiri and Yoshihiro Kakeji have no conflicts of interest or financial ties to disclose.

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