Robotically Assisted Laparoscopic Sacrocolpopexy

Medical Background

FM was a 56-year-old patient with a history of 4 vaginally delivered children. She expressed concern about progressively worsening vaginal pressure and bulge. A “ball like” formation would protrude between her thighs at the end of the day or after strenuous physical activity. This seriously impacted her quality of life including such activities as walking, sitting, exercising and vaginal intercourse.

FM’s OB/GYN determined that she had a prolapsed uterus and vagina. The initial solution was to use a ring shaped insertable device called a pessary. FM tried 4 different types and found all of them very uncomfortable. Seeking a definitive solution, she turned to Atlanta Minimally Invasive Gynecological Surgery Center where she was advised to undergo a Robotically Assisted Laparoscopic Supracervical Hysterectomy (RALSH) combined with a Robotically Assisted Laparoscopic Sacrocolpopexy (RALSCP).

Patient Results and Benefits of Minimally Invasive Robotically Assisted Laparoscopic Sacrocolpopexy

The RALSH and RALSCP were both performed successfully and FM was able to return home the same day. She was able to return to light duty activities in 2 weeks and all activities, including vaginal intercourse, within 6 weeks. Her vaginal pressure and bulge issues were completely resolved.

About Dr. Nathan Mordel

A graduate of Hadassah Hebrew University Medical School in Jerusalem, Israel, Dr. Mordel completed a residency in Gynecology and Obstetrics and a fellowship in advanced pelvic surgery at Emory University Hospital in Atlanta. Having practiced in the state of Georgia since 1998, Dr. Mordel specializes in advanced Robotic, Laparoscopic and Pelvic surgery, including surgeries for fibroids, endometriosis, heavy and/or painful menstrual periods, pelvic organ prolapse and urinary incontinence. He has performed more than 1500 Robotic and Laparoscopic Hysterectomies and Myomectomies with no bowel or ureteral injuries, 1000 Tension Free Vaginal Tape Placement procedures, and more than 500 Robotic and Laparoscopic Sacrocolpopexy and Sacrococcygeocopexy procedures.

About AMIGS Surgery

Founded in 2002, Atlanta Minimally Invasive Gynecological Surgery Center provides patients with a clinic where compassionate, human interaction runs in tandem with the forefront of medical technology. Prospective patients will be pleased to learn that by using the da Vinci Surgical System, Dr. Mordel is able to make the sacrocolpopexy an outpatient procedure. Additionally, a Robotically Assisted Laparoscopic Sacrocolpopexy greatly reduces recovery time to as little as 2-3 weeks for general activities and full mobility in 6 weeks.

What is Robotically Assisted Laparoscopic Sacrocolpopexy?

Robotically Assisted Laparoscopic Sacrocolpopexy (RALSCP) restores the natural position and shape of the vaginal tube by using a special mesh to suspend the vaginal walls towards the ligament overlying the sacrum. The mesh is retroperitonealized (under the inner lining of the abdomen) to prevent contact with the bowel loops.

Robotically Assisted Laparoscopic Sacrocolpopexy is part of the rapidly growing field of Robotically Assisted surgery. RALSCP increases the precision of the doctor’s abilities while decreasing the strain on the patient through the innovative use of the da Vinci Surgical System, a minimally invasive robotic instrument. By giving the surgeon enhanced ergonomics and a three dimensional view of the surgical field, the da Vinci Surgical System provides the surgeon with a dramatically expanded perspective in which to employ superior control over instruments that naturally mimic the minute movements of the hand.

Dr. Mordel is one of the few physicians in Metro Atlanta who performs RALSCP, operating on 50-75 such cases each year.

The FDA recently issued a warning regarding transvaginal usage of mesh in the repair of prolapse. The FDA specifically stated that the retrovaginal usage of mesh (which is used in RALSCP) is appropriate and indicated.

DaVinci Robotic Surgery Benefits

- Minimally invasive robotic surgery
- Minimal scarring
- Bloodless procedures
- Faster recovery times
- Outpatient surgery
- Ergonomically designed to improve surgical mobility
- Low risk of wound infection