

Apollo Cancer Centres

ROBOTIC THORACIC SURGERY (For Right Upper Lung Lobe Carcinoid Tumour)

A 26 year old female patient, was under treatment of our Pulmonologist for Covid-19 Pneumonia. During investigations, it was incidentally found to have tumour in Right upper lobe bronchus. HRCT scan done reveals mass in right upper lobe bronchus at the origin of apical and anterior segment. An Endobronchial biopsy with debulking was done and histopathology examination of the biopsy sample done revealed a Carcinoid Tumour. She was further referred to our expert Surgical Oncologist for definitive upper lobectomy (Lung) surgery. Patient was counselled and explained in detail about Minimally Invasive Robotic surgery right upper lobectomy V/s Thoracoscopic (VATS) V/s Open thoracotomy surgery. Considering young age, unmarried female patient, decision was taken to operate **Minimally Invasive Robotic surgery of Right Upper Lobectomy**. Patient tolerated the procedure well and had an uneventful recovery. Post-operative day-2 patient was mobilised out of bed. Subsequently, was deemed fit and discharged on day-4.

Benefits of Robotic Thoracic surgery over Conventional Open Thoracotomy Surgery.

1. Smaller incision over large traditional thoracotomy incision over chest.
2. Cosmesis
3. Painless procedure
4. Less drain dwell time
5. Early ambulation
6. Short length of stay
7. Early discharge

Clinical Team:

Dr. Shishir Shetty, Lead Sr. Consultant, GI, HPB, & Thoracic Oncology

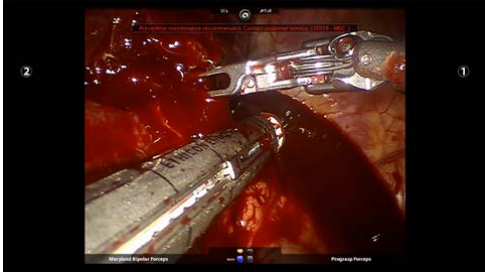
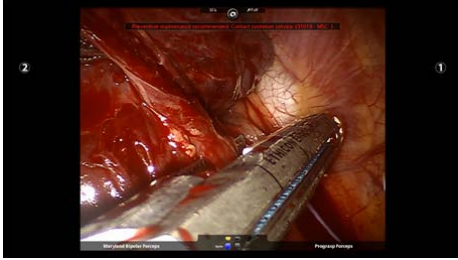
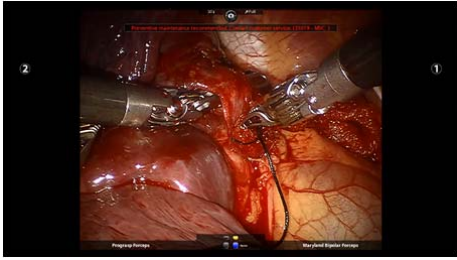
Dr. Abhay Uppe, Consultant, Pulmonology

Dr. Nikhil Rane, Clinical Associate, Thoracic Oncology

Dr. Makarand Karpe, Clinical Associate, Surgical Oncology

Dr. Pravin Pawar, Clinical Associate, Surgical Oncology

Dr. Divya Daga, Clinical Associate, Surgical Oncology



Robotic Thoracic Surgery