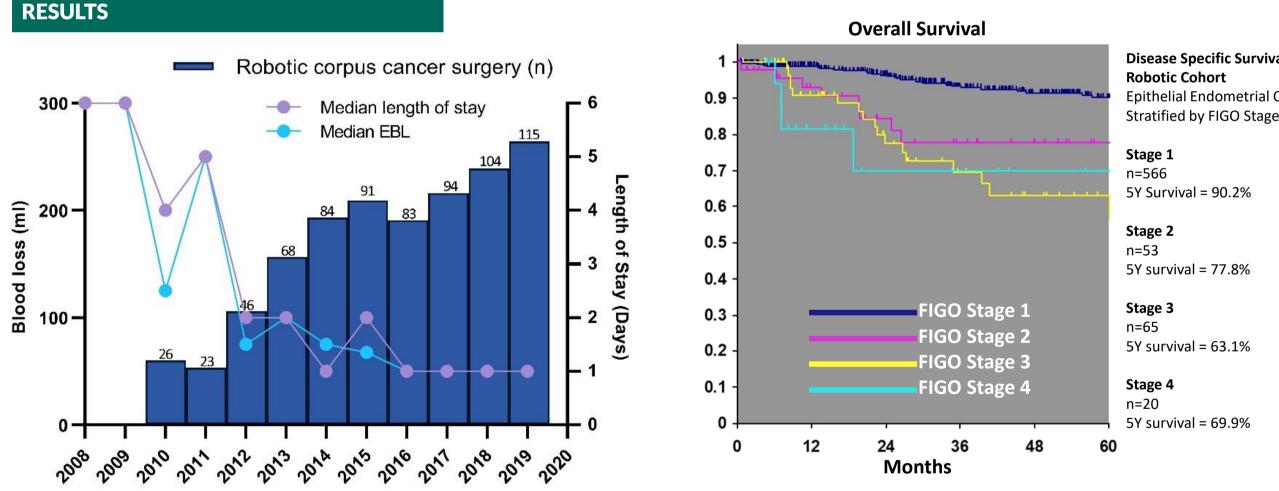


# **Robotic surgery reduced length of** stay to 1 night from 6, blood loss to 50ml and increased MIS to 93%.

**ROBOTIC CORPUS CANCER SURGERY: TEN YEAR MORTALITY DATA** FROM THE UK EPICENTRE IN GUILDFORD



**Disease Specific Survival Epithelial Endometrial Cancer** Stratified by FIGO Stage (2009)

952 patients received primary surgery for corpus cancer between 2010-2019. Robotic: 734 operations, conversion rate 0.54% Median EBL 50ml. Median LOS 1 day, 30-day Mortality 1/734(0.14%) Open: 164 operations, Median EBL 500ml, Median LOS 6 days, 30-day Mortality 5/164(3.05%).

#### **INTRODUCTION**

The Royal Surrey in Guildford has been performing laparoscopic surgery for endometrial cancer since 2002 and introduced robotic assistance in January 2010. Since then >1400 gynaecological oncology robotic procedures have been performed: the greatest experience in the UK.

#### **METHODS**

Retrospective cohort study of surgical treatment for corpus cancer using prospectively collected data between 01/01/2010-31/12/2019

### **CONCLUSION**

In 2019, 93% of women treated in Guildford for endometrial cancer received MIS. Since 2008 our conversion rate to open has fallen from 18% to 1.7%, median EBL from 300ml to 50ml and our median LOS from 6 days to **1 night**. The lowest **30-day mortality** (0.14% vs 0.63% overall) was seen within our robotic cohort. Introduction of the Da Vinci robot in our Centre has led to a revolutionary change in practice. Many cases previously thought not fit for surgery, are now recommended robotic surgery.

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