# THE USE OF PERCUTANEOUS AND INTRA ABDOMINAL RETRACTORS FOR REDUCED PORT COLONIC SURGERY 

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## BACKGROUND

Laparoscopic colectomies are usually performed using 4 or 5 ports in different quadrants.
In order to further reduce surgical trauma and to improve cosmetic, "reduced port surgery" is becoming increasingly popular but it poses some limits mainly related to ergonomics and traction and contratractions.

The use of percutaneous- as well as endo-retractors may help to overcome some of these problems.


## MATERIALS AND METHODS

Percutaneous retractors (T-PEA LIFTER ${ }^{\oplus}$, Surgical Perspective, Strasbourg, France) thanks to the use of a straight needle attached a surgical suture that end with "plastic" button can be introduced through a 10 mm port and used to lift solid organs in particular the fundus of the uterus during anterior rectal resection.


Intra-abdominal adjustable retractors (VERSA LIFTER ${ }^{\oplus}$ Surgical Perspective, Strasburg, France) allow dynamic organ suspension during laparoscopic procedures.


The device is inserted in the abdominal cavity through an existing $10-\mathrm{mm}$ port using a dedicated introducer and it is completely repositionable and adjustable intraoperatively.


The system consists of two clips connected together by a 0.35 mm diameter Teflon-coated polyester thread.

One clip is attached to the organ to be suspended, the other one is attached to the peritoneum in the desired suspension angle, while the thread between the two anchors adjusts the distance after their application ( $60 \mathrm{~mm}-115 \mathrm{~mm}$ ). Clips can be easily manipulated in the abdominal cavity during surgery with a simple grasper and anchors can be re-placed numerous times.

## RESULTS AND CONCLUSIONS

We used these devices during right, left and transverse colectomy for cancer and their use was always extremely intuitive requiring a minimal learning curve. No intra or post-operative complications related to those devices were reported. Percutaneous and endo-retractors are helpful devices that allow the reduction of the assisting port, usually required only for traction and contra-traction during laparoscopic colectomies.

