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Learning New Tricks

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With better detection methods, tumors are found at earlier stages when they are small and removable without invasive open surgery. The popularity of minimally invasive and robotic surgeries over the past decade means an increasing number of older surgeons are learning these new techniques to complement their open surgery background. Younger surgeons, on the other hand, may focus more attention on the minimally invasive surgeries than open procedures.

The National Cancer Institute's Peter A. Pinto, MD, who specializes in minimally invasive urologic surgery, says both older and younger surgeons need to balance their skills at both types of surgery. But with certain cancers, such as prostate and brain, the trend is moving toward minimally invasive surgery.

"Robotic surgery is still in its infancy," Dr. Pinto says. The da Vinci system, a new robotic device, partly functions as a computer, so a slight risk exists of the robot "crashing" during surgery, he says. "In such a case, the surgeon would need to know how to complete the case the old-fashioned way—with open surgery or pure laparoscopic techniques," Dr. Pinto says, emphasizing the need for surgeons to be trained and experienced in open surgery.

Because minimally invasive surgery has not been proven superior to open surgery in terms of survival, patients and their surgeons must weigh the pros and cons of both.

For surgeons who trained in open surgery and developed minimally invasive skills afterward, Dr. Pinto says their best surgical approach for an individual patient may be open surgery. "My concern is that experienced open surgeons may feel the need to adopt these minimally invasive techniques for fear of losing the patients to other surgeons," Dr. Pinto says. "The open approach is still a very standard procedure."

Although older surgeons may get a quick course on robotic surgery, which allows more patients to be treated with minimally invasive procedures, experts say it's not ideal. While younger surgeons are now exposed to these techniques during training, the need to educate older surgeons is growing.

To meet this need, Roswell Park Cancer Institute's Center for Robotic Surgery has secured a grant to provide comprehensive week-long training of robotic surgery to surgeons across the country, which in turn will improve patient safety and bring the benefits of robotic surgery to more patients in non-urban communities. Other continuing education programs are popping up around the country, but experts point out there's no substitute for experience and an adequate volume and diversity of cases.

Because minimally invasive surgery has only become widespread in the past decade, and robotic surgeries even more recently, many surgeons continue to practice open surgery very successfully. But the trend is quickly moving toward the newer, more advanced approaches.