



ERGONOMY : DEFINITION

✓ ergonomy: greek

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- ergon : work
- nomos : law
- ✓ Quantitative and qualitative study of your work in order to improve the conditions of work and increase the productivity.

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✓ Look for a better adaptation between the function, the equipment and the user.

WHAT IS LAPAROSCOPY

✓ A way of access ?

✓ No !

- It is a different access
- With planned but also unexpected advantages (cf EP)
 So this is a different philosoph
- So this is a different philosophy for different benefits.



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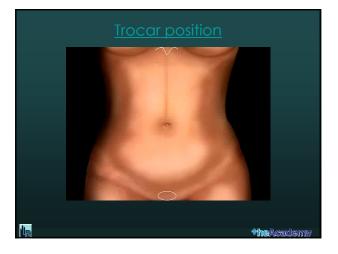
Open Surgery Laparoscopic Surgery Direct binocular Hand & eye coaxial vision Hand & eye coaxial Suturing in semi-automatic fashion Indirect magnified image of the operative fiel Direct binocular Hand & eye coaxial Suturing in semi-automatic fashion Each step facilitates the succeeding one Suturing in semi-automatic fashion Each step facilitates the succeeding one

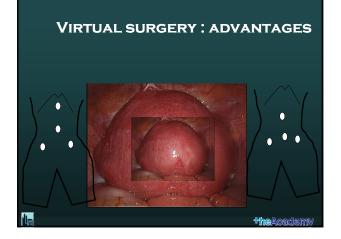
Obstacles of Widespread Acceptance of the Laparoscopic Approach

- ✓ Ergonomics
- Working on a Screen (3D -> 2D)
- \checkmark Exposure:

- Good vision but reduced visual field (180 vs 110°)
- Poor exposure in the operative field from bowel
- Inadequate retractors and limited in number
- Lose your assistant
- Lose of aesthetic advantages if \uparrow numbers of trocars

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PUT ALL INFORMATIONS NEEDED ON YOUR SCREEN.



 \checkmark Instruments info

- Anatomy info
- Energy info
 Remove or hide no useful info

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NEVER STOP TO LOOK AT THE SCREEN!

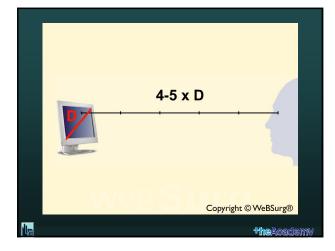
- ✓ Team organisation✓ Operative field
- organisation
- \checkmark Trocars placement
- ✓ Instruments functions

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✓ Operative strategy.



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Why not to wash a lot ?

- Loose time to aspirate the fluid
- Makes image disturbing
- Disseminate blood everywhere
- Makes us loose the correct dissection pl

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RETRACTION RESTRICTION.



- A trocar used for retraction is lost for surgery.
- Every time possible retraction should use an alternative way.

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Benefits of Correct Exposure

- 1. Gain an Assistant
- 2. Improve Surgical performance:
 - Excellent view and large working space
 - Comfort and confidence
 - Operate with both hands
- 3. Safety:

- Haemostasis,
- Lower intra-abdominal pressure

→ SAVE TIME

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SUSPENSION TECHNIQUE

Achieved by:

Transparietal fixation

Clamps +++

Knots

Internal attachment

Fixation to other

internal organs

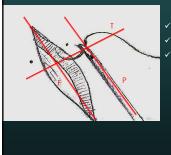








The perfect stich



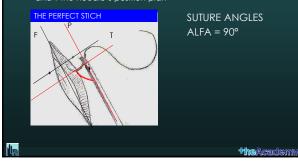
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✓ P = axe of needleholder
 ✓ T = axe of needle
 ✓ F = midline of incision

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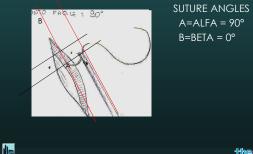
THE STICH SUTURING ANGLES

ALFA is the angle between axe of needleholder and T the needle's position plan



THE STICH SUTURING ANGLES

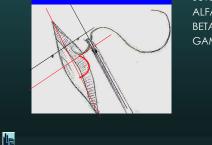
BETA is the angle between axe of needleholder and F the virtual midline of the closure's tissue



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THE STICH SUTURING ANGLES

Gamma is the angle between T, the needle and F the virtual midline of the closure's tissue



SUTURE ANGLES ALFA = 90° BETA = 0° GAMMA = 90°

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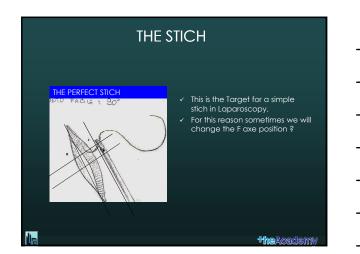
THE STICH

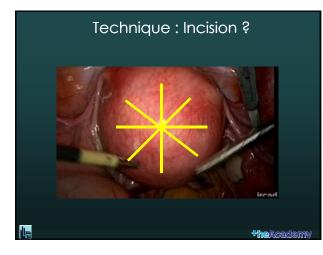
When the needleholder P axe is parallel to the F scare tissue axe we will have: THE PERFECT STICH. This means that the axe of the needle plan is 90° degrees angled respect to the needleholder P axe.

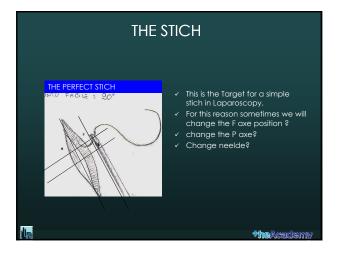


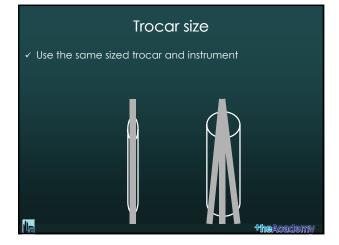
SUTURE ANGLES ALFA = 90° BETA = 0° GAMMA = 90°

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General aspects

- Slow down from time to timeDefine & redefine your strategy
 - Good hemostasis



- $\checkmark\,$ Both hands must work
 - Beginner

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Experienced



Ambidexterity

- Tissue manipulation
- Suture techniques
- Change in instruments



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General aspects

- Good cooperation with assistant
- Tell clearly your assistant what you want
- ✓ Distorsion of information !!

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What is wrong ?





KEY PHRASES

- ✓ Put all informations needed on your screen.
- $\checkmark\,$ Never stop to look at the screen
- ✓ Think before you wash
- ✓ Retraction & exposure
- ✓ Train ambidexterity

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Knots

- ✓ Do always the knot you know !
- \checkmark Do not try to make SHOWS with knots tying



✓ When blocked better is to remove the suture !







Exercises

- Needle insertion through trocars
- Loading the needleSuturing WITHOUT KNOTTING
- - Greek line
- Extracorporeal knotting
- ✓ Intracorporeal knotting
- 2 layer suture on chicken legDeep muscle layer





