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Тезис

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Minimally invasive surgical methods in treatment of the elderly

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Minimally invasive surgical interventions were widely disseminated in surgery in the 90th when introduction of endovideosurgical equipment and multislice computed tomography (MSCT) has been started in surgical practice. During these years, great clinical experience was accumulated of its using in providing surgical help to patients with urgent pathology of abdominal and chest organs. But the question about possibility of using minimally invasive methods in treatment of the elderly still stays open because of possible cardiorespiratory complications risk.

The aim of research was results estimation of surgical treatment and cardiorespiratory complications risk prediction in treatment of the elderly with minimally invasive methods.

The general surgery ISMU clinic has been using minimally invasive surgical interventions (laparoscopy and drainage with MSCT) in treatment patients with urgent pathology of abdominal organs since 1992.

Material and methods. The results of checkup and surgical treatment which was provided to 34 patients in surgery department with diseases of hepatobiliary tract and abdominal organs were analyzed.

Results. There were 17 men and 17 women. 15 of them were older than 60 years old. Laparoscopy surgery was provided to 22 patients (9 of them older 60 years old). Indications for using minimally invasive methods were: destructive forms of acute calculous cholecystitis (15 patients, 7 of them older 60 years old); chronic calculous cholecystitis (3 patients); acute appendicitis with destruction and peritonitis (2 patients); diagnostic laparoscopy with abdominal organs revision (3 patients, 2 of them older 60 years old). 7 patients older 60 years old had attendant pathology of cardiovascular system (4 patients had IHD; 2 patients had hypertonic disease; 1 patient had atrial fibrillation and IHD) and 2 patients had attendant pathology of respiratory system (bronchial asthma and destructive pneumonia).

Drainage of abscesses with MSCT control was provided to 12 patients (6 of them older 60 years old). 4 patients (3 of them older 60 years old) had liver abscess, 2 (1 older 60 years old) had pancreatic necrosis, 1 had retroperitoneal phlegmon, 2 (1 older 60 years old) had gall-bladder empyema, 1 had acute pancreatitis, 1 had abscess of Douglas space and 1 had perforated duodenum ulcer with limited peritonitis. Attendant pathology of cardiovascular system was identified in all patients older than 60 years old.

Results of treatment: all the patients were discharged with recovery during 7-11 days after the surgery, complications and lethal outcomes were absent.

Conclusion. Minimally invasive methods in surgery of abdominal organs can be used and more preferable in treatment of the elderly even with attendant pathology, despite of cardiorespiratory possible risk.

Keywords: surgery, minimally invasive, laparoscopy, drainage