## Robotic Reconstruction of Vesico-Vaginal Fistula (VVF): Early Experience

**Introduction and Objective:** Describe the method of robotic VVF repair and evaluate the results of 3 patients operated by this method

Materials and Methods: Between Oct. '10 and Dec. '11 a total of 3 patients were diagnosed with VVF. All are post post-hysterectomy. After a failed attempt of 4-6 weeks of cauterization, these patients underwent robotic repair of the VVF. Pre- and postoperative parameters like console time, estimated blood loss, post operative complications, hospital stay were studied. Robotic VVF repair was done by excision and freshening of the fistulous margins after complete separation of the bladder from the vagina, closure of the vaginal opening and bladder opening done separately with absorbable sutures. Omentum was then put as, interposition between these suture lines. The Foley catheter was removed on the 14th postoperative day after voiding cystourethrography.

**Results:** Mean console time (between docking and undocking of robot) was 172 mins (range 165 to 312) and estimated blood loss of less than 50 mL. The length of hospital stay was a mean of 10 days (range 9-11 days). At 3 months of follow-up, these patients continued to void normally without any recurrence of VVF. The Foley catheter was removed on the 10th postoperative day after voiding cystourethrography. No complications were reported

**Conclusion:** Robot-assisted VVF repair is a safe and feasible approach.

\*To view this video, please click here\*