

The Role of Technology in Minimally Invasive Surgery

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Editorial

Minimally invasive surgery refers to any surgery that's performed through tiny incisions rather than an outsized opening. Because your surgeon will make smaller incisions, you'll likely have a quicker recovery time and fewer pain than traditional open surgery but with an equivalent benefits as traditional surgery.

During minimally invasive surgery, your MedStar Surgeon will make several small incisions in your skin, typically a couple of millimeters long. Your surgeon will then insert an endoscope (a long, thin tube fixed with a camera and light) into one among the incisions. Images from the endoscope are sent to monitors within the OR in order that your surgeon can view clear, magnified pictures of the world needing surgery. Your surgeon will then insert surgical instruments through the opposite incisions, allowing your surgeon to perform the surgery on whatever's wrong inside your body.

The benefits of minimally invasive surgery include: Smaller incisions, Less pain, Minimal to no scars, Less blood loss, Lower rate of complications, Shorter hospital stay.

Laparoscopy (from Ancient Greek *λαπάρα* (lapara) 'flank, side', and *σκοπέω* (skopeo) 'to see') is an operation performed within the abdomen or pelvis using small incisions (usually 0.5–1.5 cm) with the help of a camera. The laparoscope aids diagnosis or therapeutic interventions with a couple of small cuts within the abdomen.

Laparoscopic surgery, also called minimally invasive surgery (MIS), bandaid surgery, or keyhole surgery, may be a modern surgical technique. There are variety of benefits to the patient with laparoscopic surgery versus an exploratory laparotomy. These include reduced pain thanks to smaller incisions, reduced hemorrhaging and shorter recovery time. The key element is that the use of a laparoscope, an extended fiber optic cable that permits viewing of the affected area by snaking the cable from a more distant, but more easily accessible location.

Laparoscopic surgery includes operations within the abdominal or pelvic cavities, whereas keyhole surgery performed on the thoracic or thoracic cavity is named thoracoscopic surgery. Specific surgical instruments utilized in a laparoscopic surgery include obstetrical forceps, scissors, probes, dissectors, hooks, and retractors. Laparoscopic and thoracoscopic surgery belong to the broader field of endoscopy. The primary laparoscopic procedure was performed by German surgeon Georg Kelling in 1901.

There are two sorts of laparoscope:

- A telescopic rod lens, usually connected to a video camera (single chip or three chip)
- A digital laparoscope where a miniature digital video camera is placed at the top of the laparoscope, eliminating the rod lens.

The mechanism mentioned within the second type is especially wont to improve the image quality of flexible endoscopes, replacing conventional fiberscopes. Nevertheless, laparoscopes are rigid endoscopes. The rigidity is required in clinical practice. The rod-lens based laparoscopes dominate overwhelmingly in practice, thanks to their fine optical resolution (50 μm typically, hooked in to the aperture size utilized in the target lens), and therefore the image quality are often better than that of the camera if necessary. The second sort of laparoscope is extremely rare within the laparoscope market and in hospitals.

It's also non-flammable, which is vital because electrosurgical devices are commonly utilized in laparoscopic procedures. Minimally invasive surgery allows your surgeon to use techniques that limit the dimensions and number of cuts, or incisions, that they have to form. It's typically considered safer than open surgery. You'll usually recover more quickly, spend less time within the hospital, and feel easier while you heal.

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