How is laparoscopic surgery for small bowel disease performed?
Laparoscopic surgery for treating diseases of the small bowel is performed through three cuts – a 1cm cut at the navel and two 5mm cuts in the lower abdomen. The surgeon passes tubes called “ports” through these small cuts. A telescope is introduced through one of them and two instruments through the other ports. It is possible to carefully examine whole of the small bowel loop by loop and identify the site of the problem. The incision near the navel is then extended to bring out the diseased segment of small bowel, excise it and join the ends back together. The small bowel is then placed back in the abdomen and the incisions are closed.

How is single incision laparoscopic surgery for small bowel disease different?
In a single incision laparoscopic surgery (SILS), the surgeon makes only one incision inside the navel and places all three cannulas or tubes through this. The entire small bowel is traced as described above and the diseased portion is brought out and excised in a similar manner.

Can SILS be offered to all patients with small bowel disease?
The surgeon would assess an individual patient to decide whether or not he / she are a suitable candidate for SILS. SILS may not be applicable to some patients, e.g.
• Those who are very obese,
• Those who have an acute intestinal obstruction and gross distention of small bowel reducing the working space inside the abdomen
• Those who have had multiple previous abdominal operations and
Traditional laparoscopic surgery, of course, can be offered to all these groups of patients.

What happens if an operation cannot be completed by SILS?
In 5% to 10% patients it may not be possible to complete the operation by SILS due to technical difficulties. The surgeon places one or two additional ports and completes the procedure in the traditional laparoscopic manner. Very rarely, it may be necessary to convert to an open operation. Both these issues are always discussed with patients prior to surgery and they are made aware that conversion to traditional laparoscopy or indeed to open surgery merely represents a sound judgment on part of the surgeon in the interest of patient safety.

What are the advantages of SILS?
• Less pain from the single, short incision after surgery
• Shorter hospital stay
• Shorter recovery time
• Faster return to normal diet
• Faster return to work or normal activity
• Better cosmetic healing (an almost invisible scar)

Disclaimer
This brochure is for information purpose only and no attempt to provide specific medical advice is intended. It is not intended to infer that surgery is always the best choice for a particular condition. You should always contact a specialist directly for diagnosis and treatment of your specific problem, and consider taking a second opinion if appropriate.