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10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



AMBULATORY ROBOTIC THYMECTOMY: PRELIMINARY ANALYSIS OF 18 CASES

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INTRODUCTION AND OBJECTIVES: Robotic thymectomy is a highly precise, minimally-invasive procedure with rapid postoperative recovery, which is why it has become treatment of choice. In this study, we describe our experience with robotic thymectomy performed on an outpatient basis to better understand the feasibility of an ambulatory robotic thymectomy program.

MATERIAL AND METHODS: Retrospective, descriptive study of 18 patients who underwent thymectomy via robot-assisted thoracic surgery on an outpatient basis at our hospital between June 2019 and December 2022. We describe the following: outpatient surgery rate with inclusion criteria; surgical technique; drain removal criteria; postoperative complications; and return visits to the emergency department.

RESULTS: Of a total of 54 patients that underwent robotic thymectomy, 17 were not eligible for ambulatory surgery due to myasthenia gravis. Of the remaining 37 patients, 19 required scheduled admission prior to surgery. Consequently, only 18 patients met previously established criteria for ambulatory surgery. Of the 18 individuals who underwent outpatient intervention, two were readmitted within 30 days (11.1%), one for removal of a foreign body at 24 hours. Four patients (22.2%) presented to the emergency room for pain control.

CONCLUSIONS: This is the first study to evaluate treatment outcomes and complications in patients undergoing ambulatory thymectomy. The results suggest that this procedure could be both feasible and safe. However, large prospective studies are needed to confirm these findings.