

## ADVANCED LAPAROSCOPIC PROCEDURES FOR ELBW INFANTS WITH A BODY WEIGHT OF 490 TO 930 GRAMS

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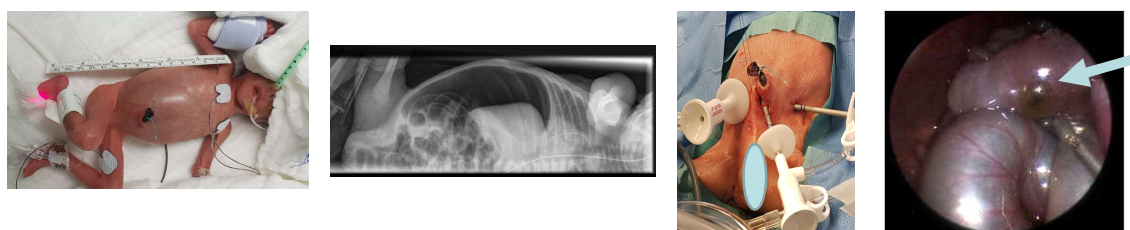
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### Conclusions

The present report indicates the possibility for improvement in minimally invasive pediatric surgery even for the very specific group of extremely low birth weight (ELBW) infants. There is a need for further technical development and larger studies in this field.

### Introduction

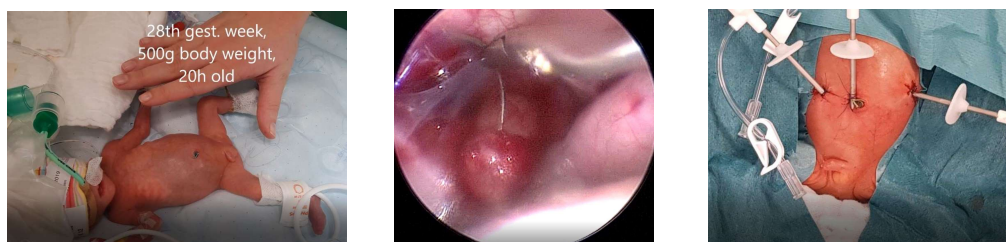
To report results of a unique series of laparoscopic surgical procedures of advanced complexity in extremely low birth weight (ELBW) infants with a body weight of 490 to 930 grams at the time of surgery



560g ELBW with a FIP (arrow), microlaparoscopic suturing

### Material and methods

Personal series of a single pediatric surgeon. Retrospective analysis of perioperative Data and postoperative course. The study included ELBW infants with a body weight of less than 1000 g at time of surgery undergoing microlaparoscopic complex procedures (including at least one intestinal suturing) without the need for conversion



### Results

Microlaparoscopic suturing of an iatrogenic rectum perforation

To the best of our knowledge, this report describes, for the first time in the literature, the accomplishment of advanced laparoscopic procedures in ELBW infants.

11 ELBW infants identified matching the study inclusion criteria in a single pediatric surgery department 2-mm instruments used for the laparoscopy in all cases, exclusively (microlaparoscopy) procedures:

- Duodeno-duodenostomy for duodenal obstruction (n=4),
- Intestinal suturing for intestinal perforation (n=6),
- Repair of an iatrogenic rectum perforation (n=1)

There were no perioperative complications. All procedures completed successfully. There was no mortality related to the surgical interventions.

### CONTACT INFORMATION

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