



Cardiothoracic and Vascular Surgeons

FEATURE ARTICLE

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Headline: Easing the Pain of Surgery - Da Vinci® Robot Helps Patients Get Back to Life

Perry Heston arrives at South Austin Medical Center in the early morning hours on December 20. He's scheduled to have a suspicious nodule in his lung surgically removed and biopsied. This 52-year-old man is moments away from becoming one of the first Central Texans to undergo minimally invasive cardiothoracic surgery – performed by a robot.

In the operating room, the arms of the da Vinci® Robotic Surgical System have been inserted into Perry's chest through three tiny incisions. Across the room, Dr. Eric Hoenicke, cardiothoracic surgeon with Cardiothoracic and Vascular Surgeons, P.A, operates the system's console, which allows him to manipulate various surgical instruments with enhanced dexterity, precision and control. He gazes into the console at the magnified 3D image of delicate tissue and organs inside Perry's chest, quickly identifies a nodule and removes it.

"The da Vinci® Surgical System has opened up a new world of opportunities," says Dr. Hoenicke. "Finding a nodule in Perry's lung was like finding a needle in a haystack. With conventional surgery, it's difficult to locate tiny nodules in a lung biopsy, but the precision of the robotic device allowed us to get a quick and accurate biopsy."

Dr. Hoenicke is the first Austin surgeon to use the da Vinci® Surgical System for chest procedures. He and his team of medical professionals are specially trained on the da Vinci® Surgical System and have been performing cardiothoracic procedures at South Austin Medical Center since summer 2010.

With traditional cardiothoracic surgery, doctors must perform a sternotomy—an incision through the flat bone in the middle of the chest—to access the heart, or certain thoracic

organs such as the thymus. To access the lungs or esophagus, a thoracotomy is typically performed, which is an incision between the ribs. Patients may face long, painful recoveries and are left with lengthy scars on their chests. Thanks to minimally invasive surgery using the da Vinci® Surgical System, surgeons are able to enter the chest through tiny incisions without performing a sternotomy or thoracotomy. The potential benefits are overwhelming: shorter hospital stays, less risk of infection, improved recovery times, reduced scarring and pain, a quicker return to normal activities, and less expense to the patient and hospital.

“I felt absolutely no pain after surgery and never took pain medication,” says Perry. “After two nights in the hospital, I walked out of the building without the aid of a wheelchair. Exactly one week after surgery, I was back to work.”

The da Vinci® Surgical System is easing the pain of surgery for a variety of patients. Due to a blockage in one of his heart vessels, 76-year-old Ernest Lagess underwent robotic-assisted coronary artery bypass surgery in November. With an extensive family history of cardiac disease, Ernest remembers the long painful recoveries his relatives endured after their heart surgeries. Using the da Vinci® Surgical System, Dr. Hoenicke and his team were able to perform Ernest’s surgery without performing a sternotomy and without placing him on a heart/lung bypass machine.

Instead of conventional surgery and a long, painful recovery, Ernest’s surgical experience was much more tolerable. He returned home after a one-week hospital stay and shortly thereafter began cardiac rehabilitation. Today he enjoys walking on his treadmill and throughout his neighborhood and is grateful for the care he received.

“If you trust your doctors, it’s half the battle,” says Ernest. “Dr. Hoenicke and his team explained everything in a way that was easy for me to understand. If anyone can qualify for surgery using the da Vinci® Surgical System, they should do it.”

For patients like 53-year-old Charles Handsel, the da Vinci® Surgical System can help minimize the effects of a major operation. Charles was diagnosed with early stage esophageal cancer, and after undergoing chemotherapy and radiation to shrink his tumor, he underwent

robotic-assisted removal of his esophagus. Although the surgical team had to perform a small thoracotomy, almost the entire esophagus was able to be removed with the aid of the robot.

“An esophagectomy is usually a very extensive operation, but the da Vinci® Surgical System eased the trauma to Charles’ body,” says Dr. Hoenicke. “Most importantly, it gave us better visualization, and we were able to remove every bit of the cancer.”

Dr. Hoenicke will always remember his very first robotic surgery patient last June. She was a young woman with a tumor on her thymus gland, situated directly behind the sternum. Although she was nervous to be the first cardiothoracic patient at South Austin Medical Center to undergo a da Vinci® procedure, she was even more upset at the thought of a seven-inch vertical scar on her chest.

“She was still a young woman and agreed to be the trailblazer,” he says. “We appreciate the early group of patients who were willing to try something new. We removed her thymus without having to perform a sternotomy. She ended up with an excellent cosmetic result and her scars are barely visible. She was thrilled with the results. This surgery is particularly helpful for someone like her, who’s young, active and anxious to get back to life.”

He adds, “We’re excited to build a new way to perform surgery, which I think down the road may cause a paradigm shift in the way cardiothoracic surgery is performed.”

To learn more about cardiothoracic surgery with the da Vinci® Surgical System, contact Cardiothoracic and Vascular Surgeons, P.A. at (512) 459-8753 or visit ctvstexas.com.