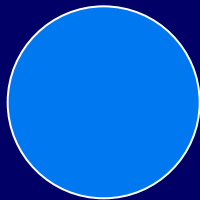


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# Laparoscopic Dissection techniques

R.K.Mishra





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“Heat cures when everything fails”

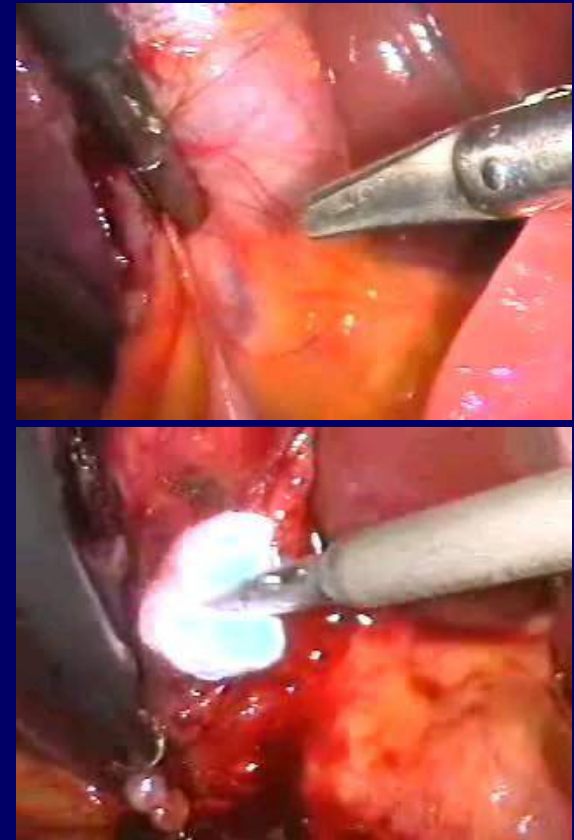


*...Hippocrates.*



# Mode of Laparoscopic dissection

- Electrosurgery
- Blunt dissection
  - Pledget
  - Instrument
- Sharp dissection
  - Knife
  - Scissors



# Electrosurgery

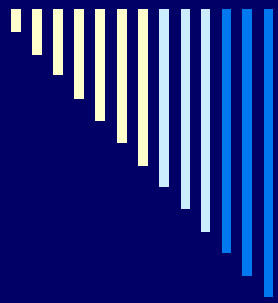
- Most convenient way of dissection in MAS combined with most risky method of dissection
- Most of the complication is due to use of energised instrument (1-2%)



# Properties of Electricity

- **Current = Flow of Electrons**
- **Circuit = Pathway for flow of electrons**
- **Voltage = Force that causes electron to flow**
- **Resistance = Obstacle to the flow of electron**





# Electro cautery and Electro surgery

## Electro cautery

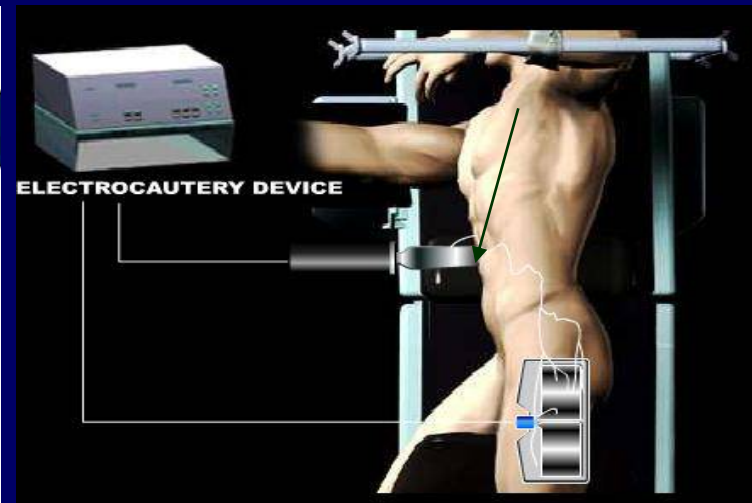
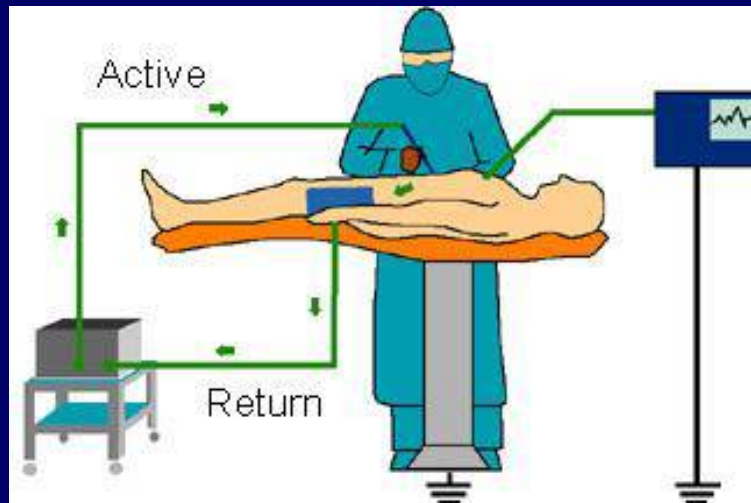
- Direct current through a high resistance metallic conductor
- It is essentially application of heat and burning of tissue

## Electro surgery

- High Frequency Alt. Current through living tissue
- Manipulation of electrons to produce heat within the cells to destroy the tissue



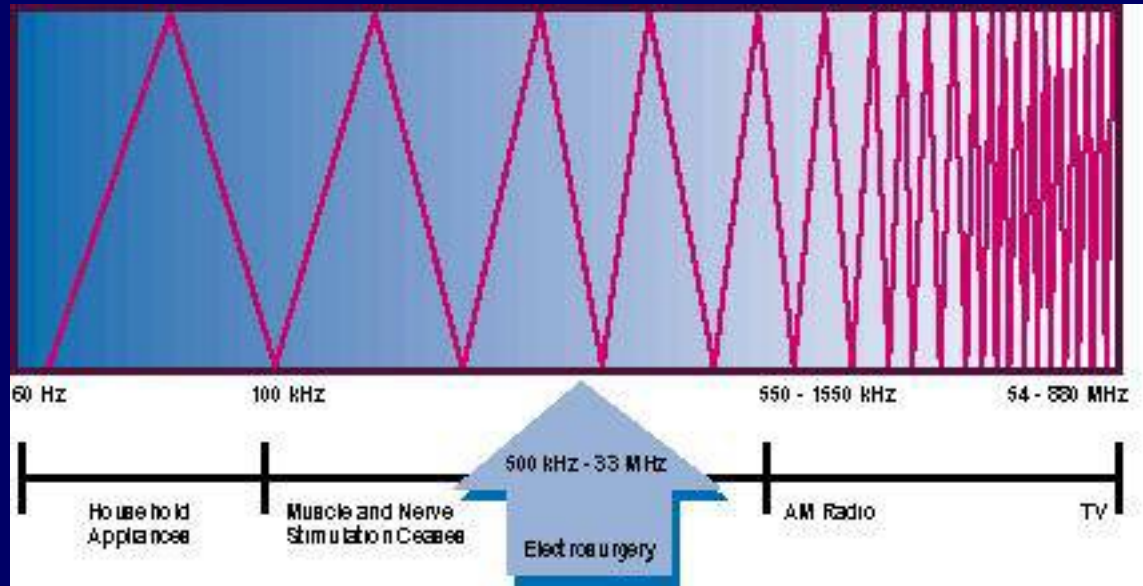
# Principles of Electrosurgery



- The circuit is composed of the generator, active electrode, patient, and patient return electrode.
- The patient's tissue provides the resistance, producing heat as the electrons overcome the resistance.



# Principles of Electrosurgery

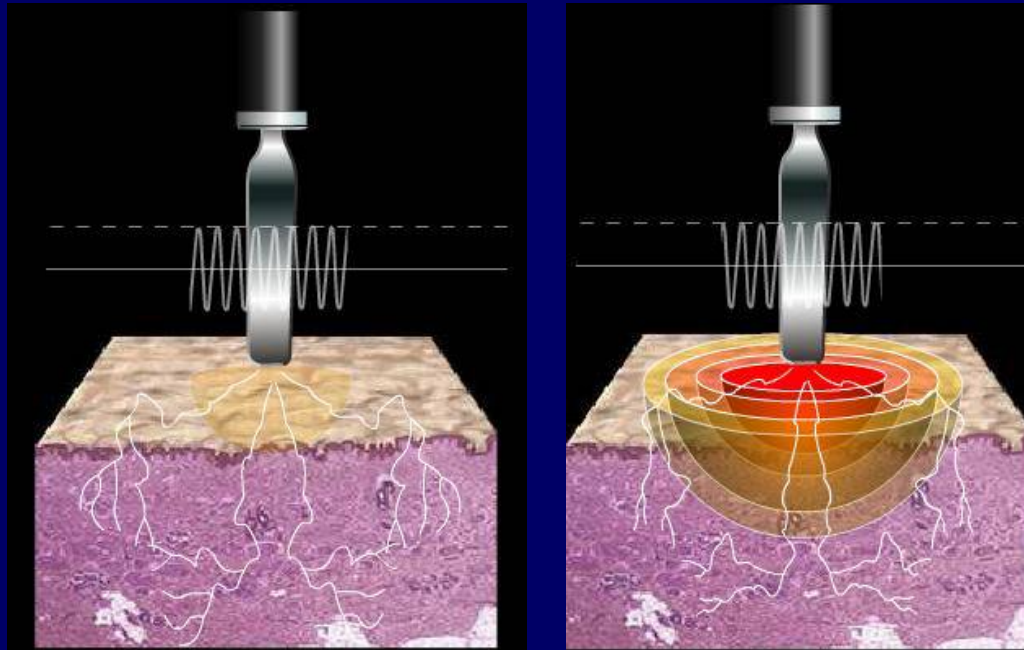


- Standard electrical current alternates at a frequency of 50 cycles per second (Hz).
- Nerve and muscle stimulation cease at 100,000 cycles/second(100 kHz),
- Electrosurgery can be performed safely at frequencies above 100 kHz.





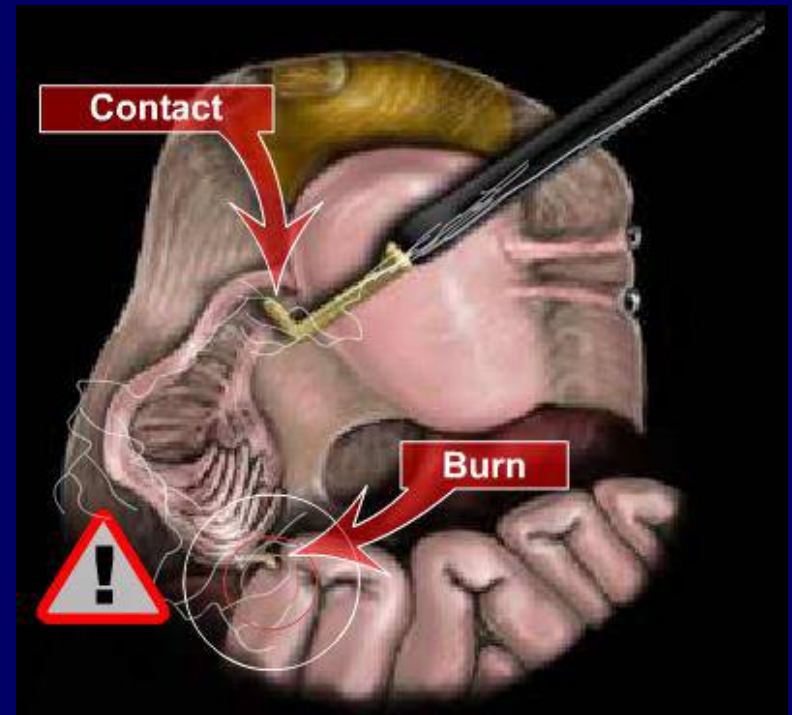
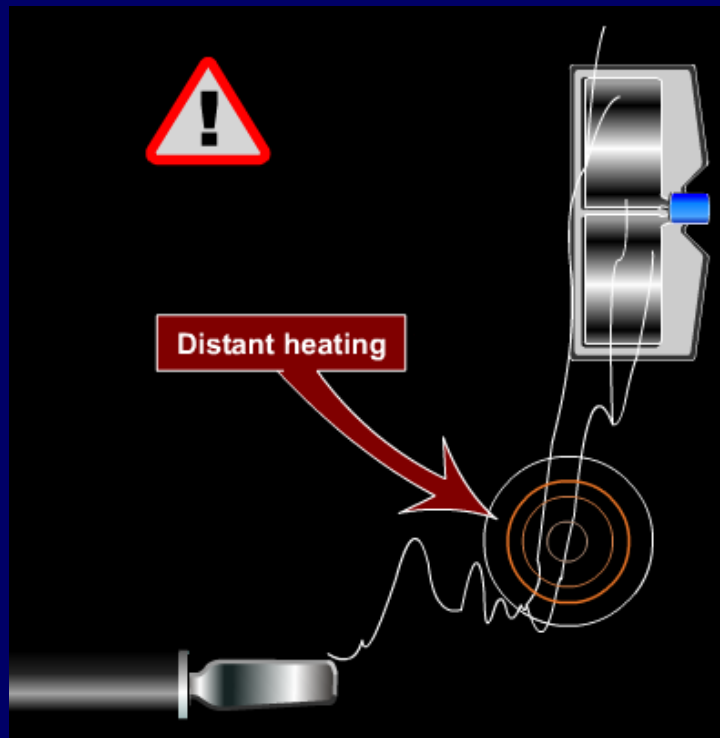
# Patient Return Electrodes



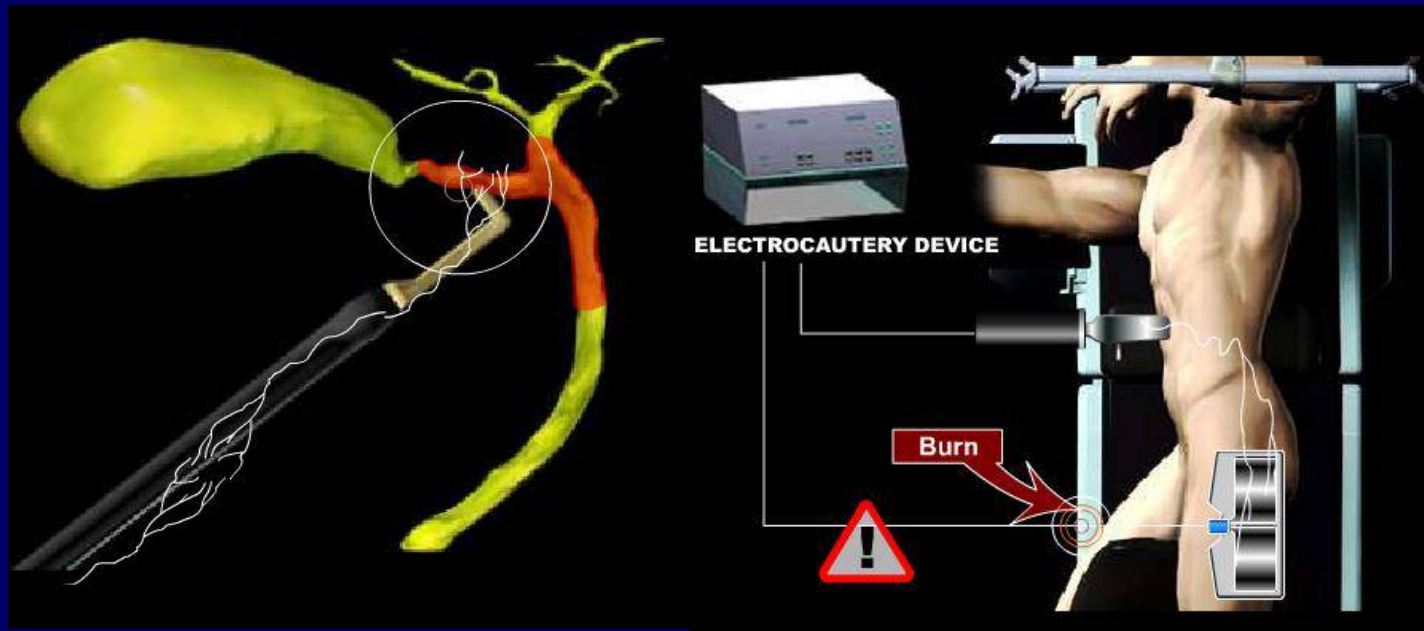
**BURN = INTENSITY OF CURRENT X TIME / AREA**



# Remote Heating

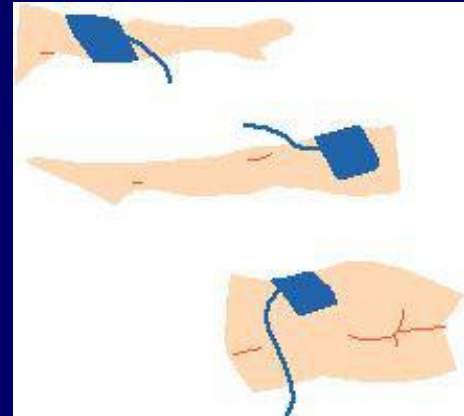


# Remote Injury



# Patient Return Electrodes

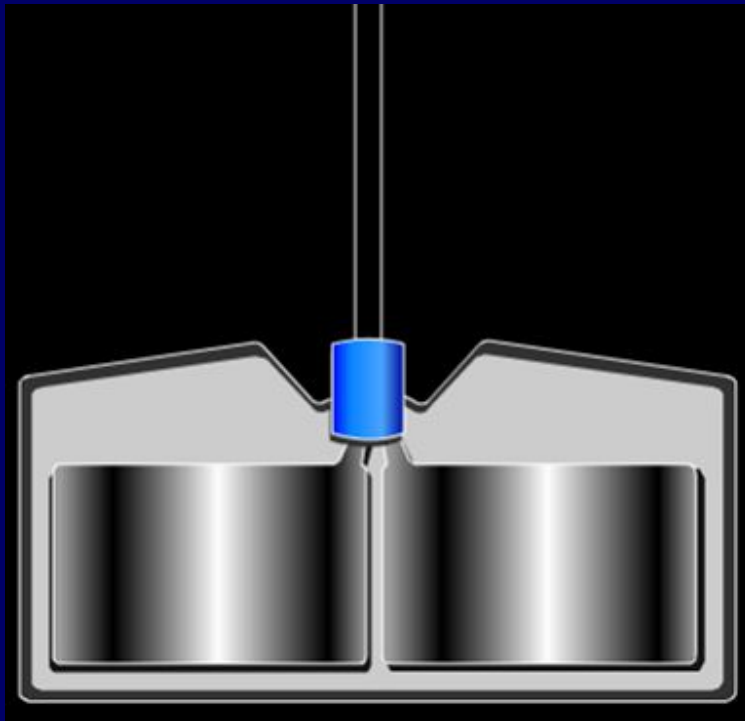
- **Assess Pad Site Location**
- **Choose:**  
Well vascularized muscle mass
- **Avoid:**  
Vascular insufficiency  
Irregular body contours  
Bony prominences
- **Consider:**  
Incision site/prep area  
Patient position  
Other equipment on patient



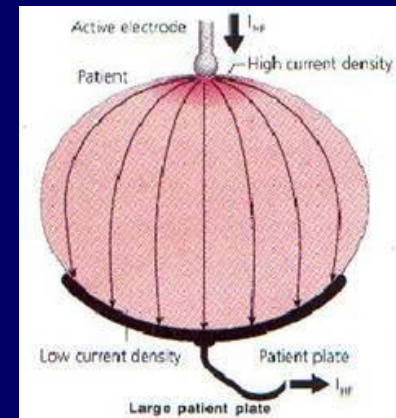
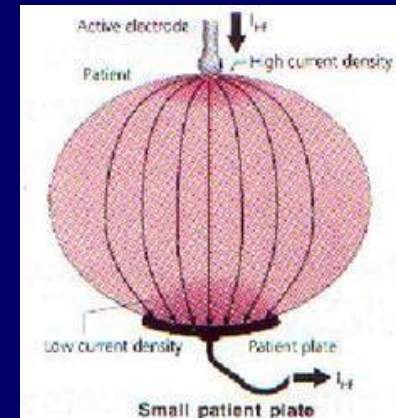
# Patient Return Electrodes Injury



# Size of Patient return Plate

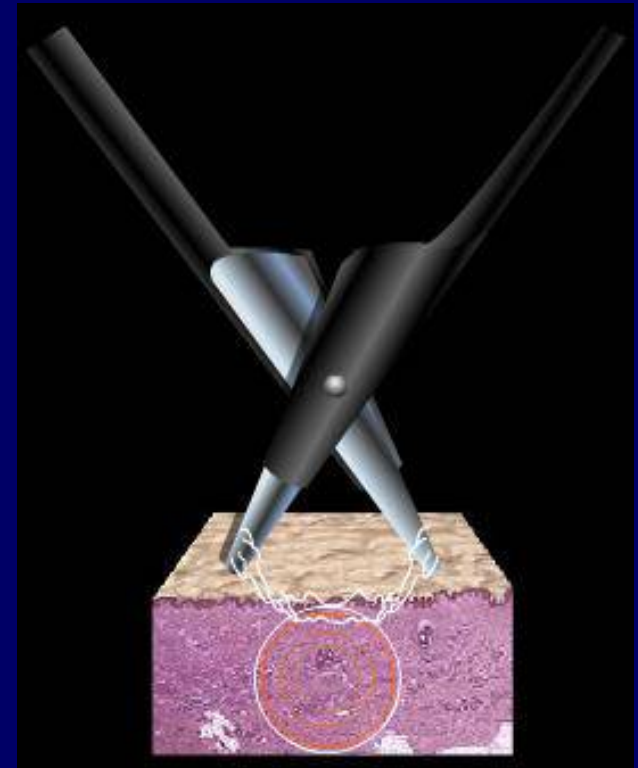
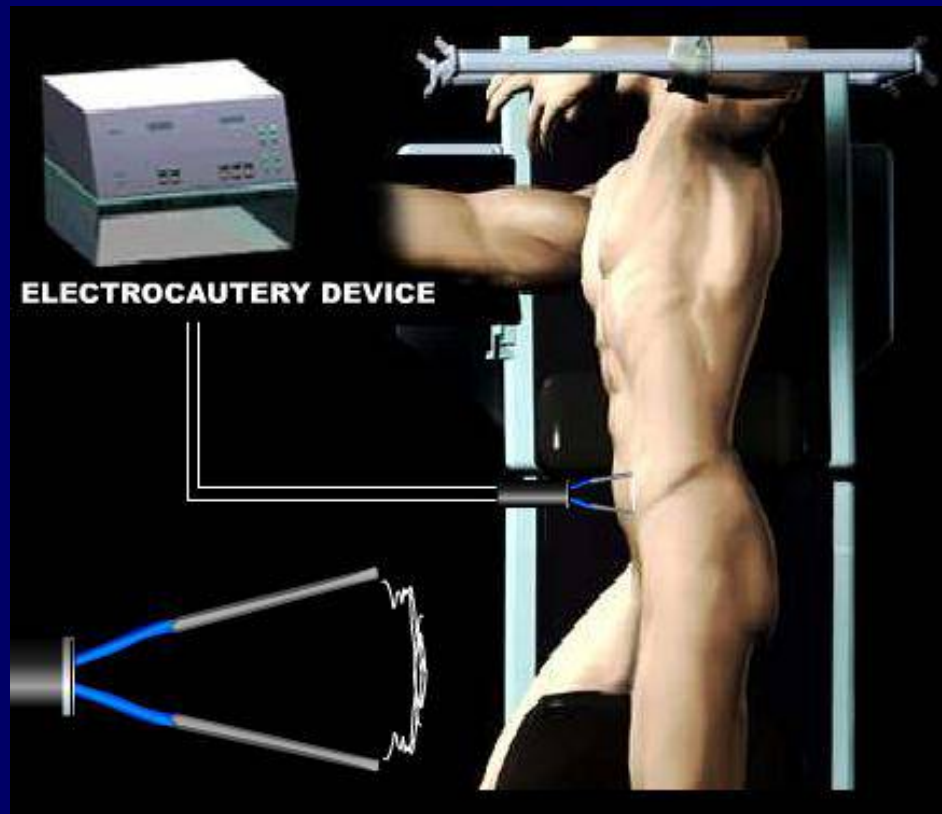


It Should be more  
than 100 square cm.

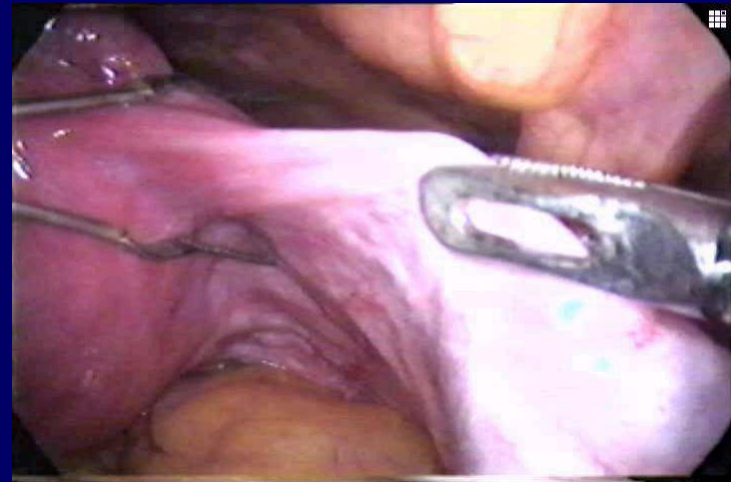
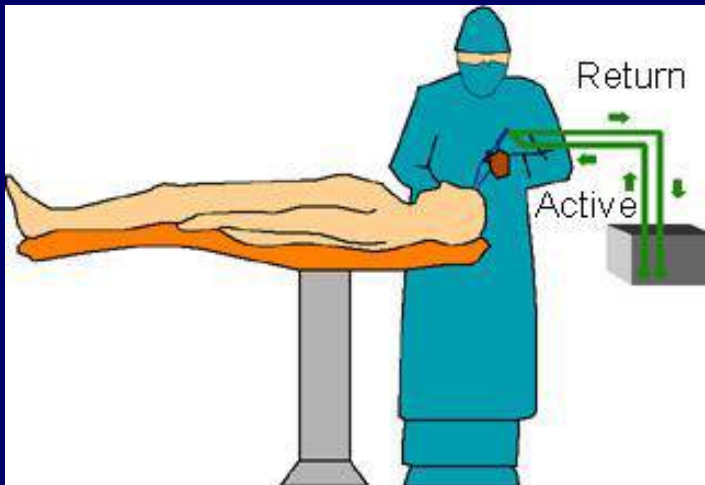




# Bipolar



# Bipolar Electrosurgery

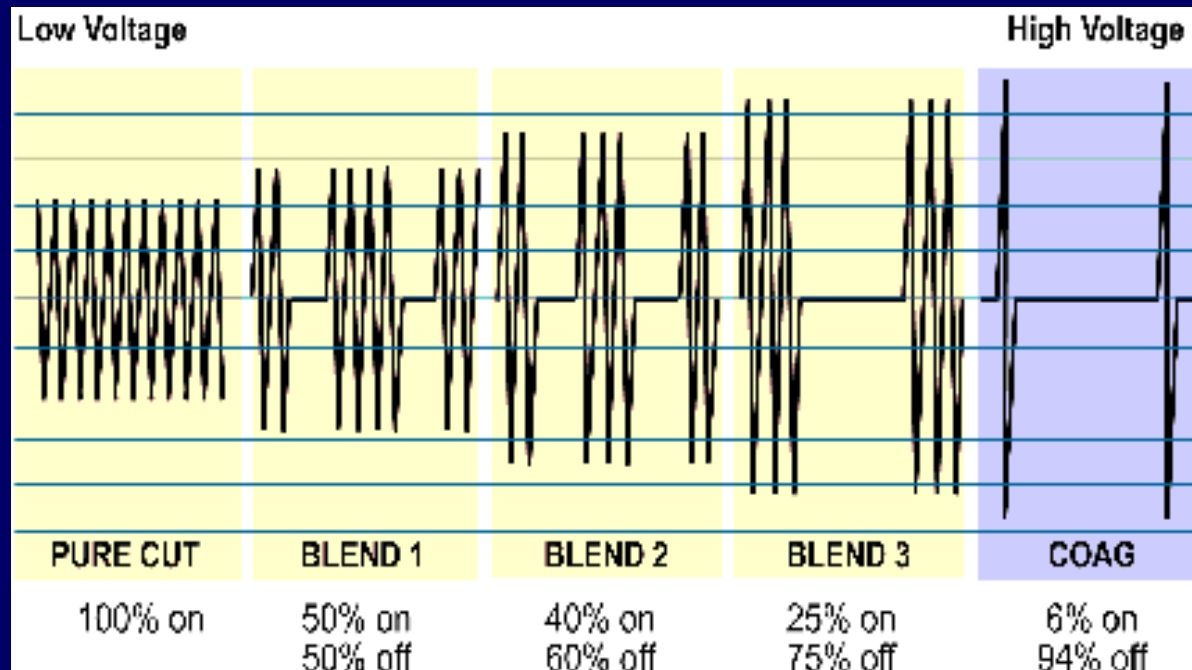


- Active output and patient return functions are both at the site of surgery.
- Current path is confined to tissue grasped between forceps.
- Return electrode should not be applied for bipolar procedures.

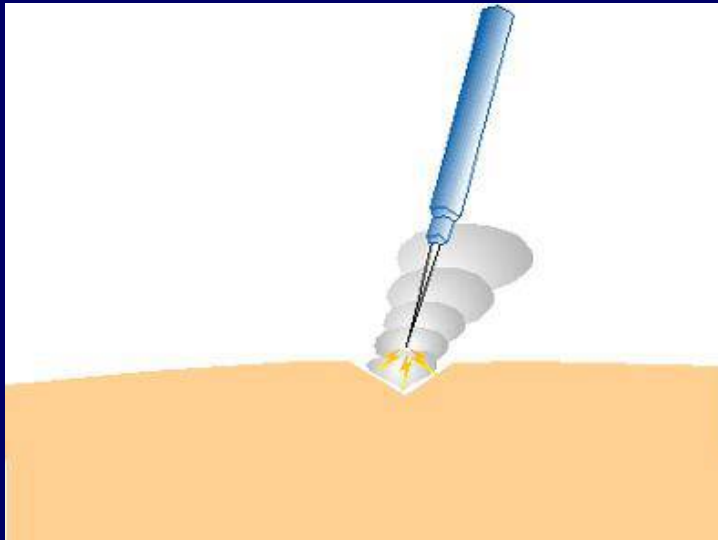




# Waveform with settings of Electrocautery



# Electrosurgical Cutting

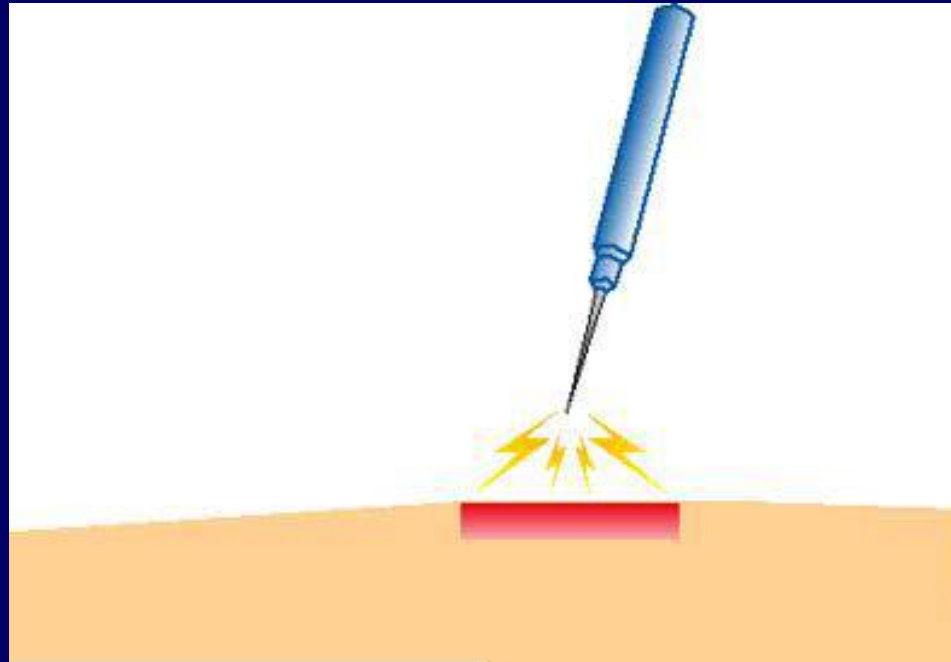


Direct touch with tissue should be avoided to achieve maximum effect  
Sparking with Cutting wave form



# Electrosurgical Tissue Effects

Direct touch with tissue should be avoided to achieve maximum effect



## □ Fulguration

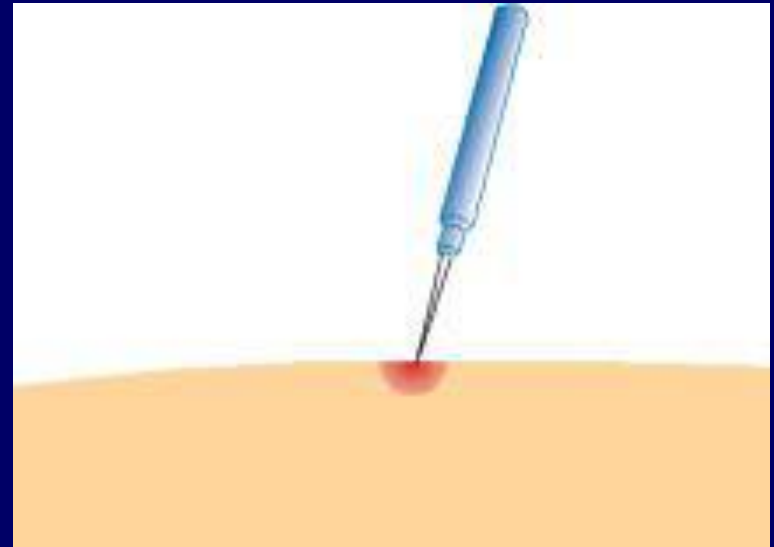
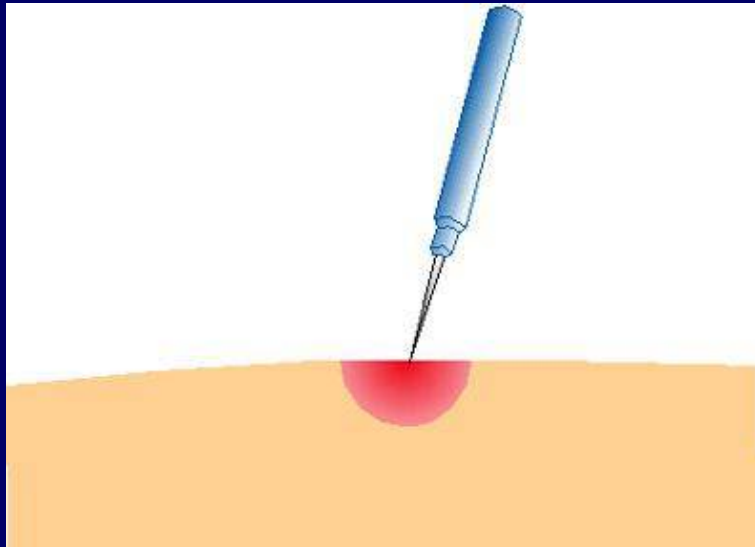
Sparking with Coagulation wave form



# Electrosurgical Tissue Effects

## Desiccation

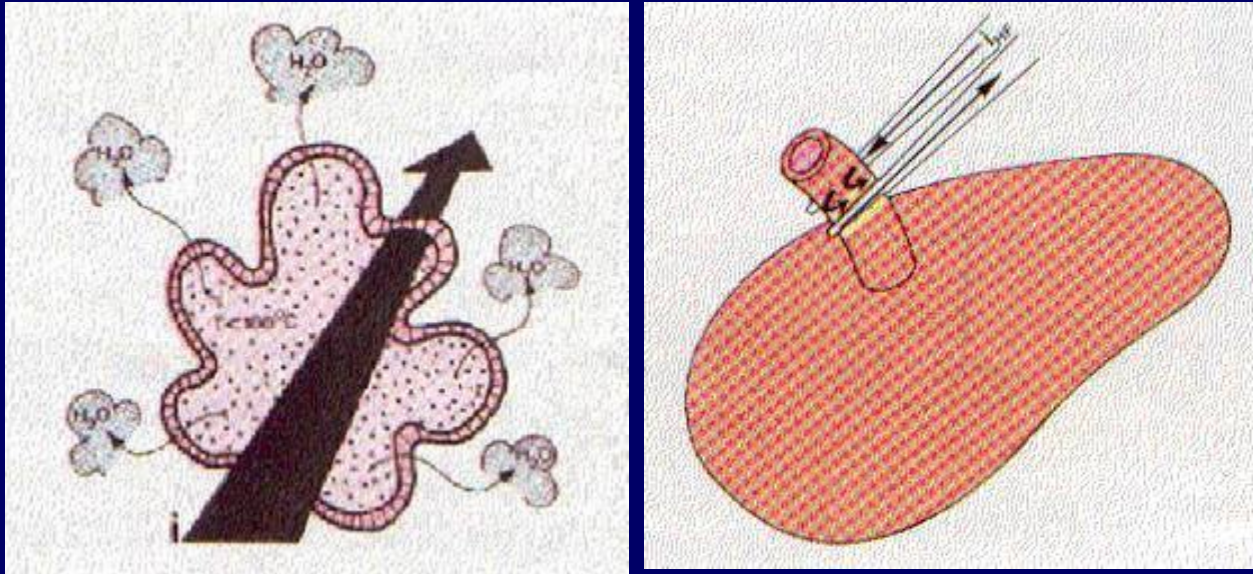
Electrosurgical desiccation occurs when the electrode is in direct contact with the tissue



You may "cut" with the coagulation current. Likewise, you can coagulate with the cutting current by timing the electrode in direct contact with tissue.



# Desiccation

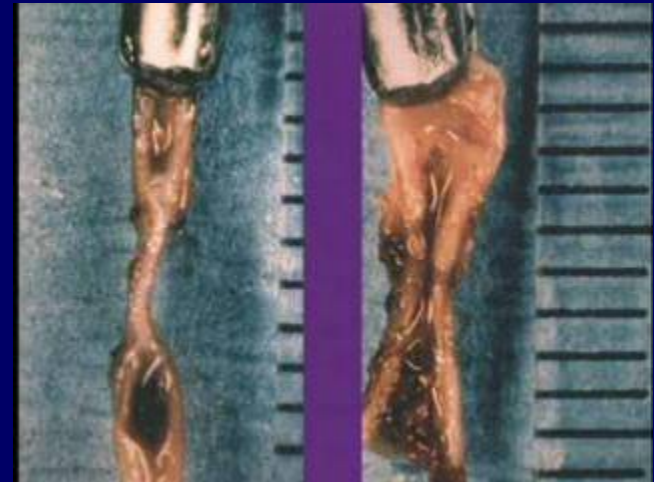


# Desiccation seals



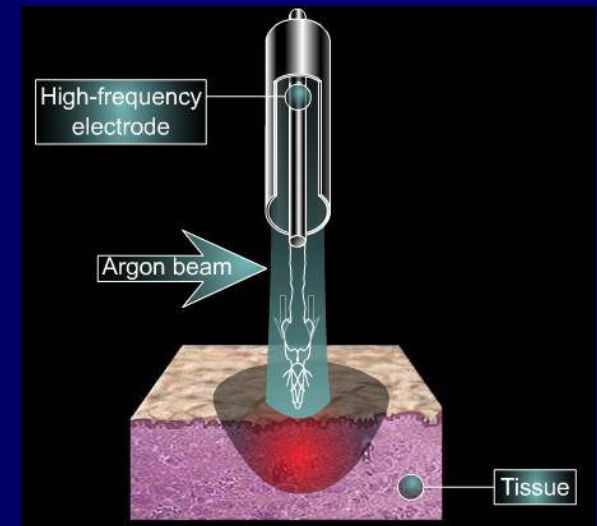
# Variables Impacting Tissue Effect

- ❑ Waveform
- ❑ Power setting
- ❑ Size of the electrode
- ❑ Time
- ❑ Manipulation of the electrode
- ❑ Type of tissue
- ❑ Eschar



# Argon-Enhanced Electrosurgery

- Argon-enhanced electrosurgery incorporates a stream of argon gas to improve the surgical effectiveness of the electrosurgical current.







# Properties of Argon Gas

- Inert
- Non-combustible
- Easily ionized by RF energy
- Creates bridge between electrode and tissue
- Heavier than air
- Displaces nitrogen and oxygen



# Benefit of Argon enhanced electrosurgery

- ❑ Less smoke, odours
- ❑ No contact in coagulation mode
- ❑ Reduced drag and tissue adhesion to electrode in contact
- ❑ Less tissue damage
- ❑ No eschar



# Tripolar Electrosurgery



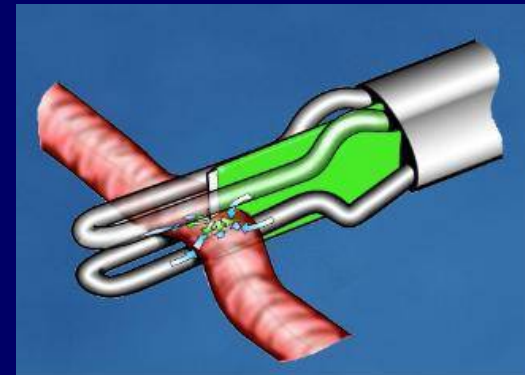
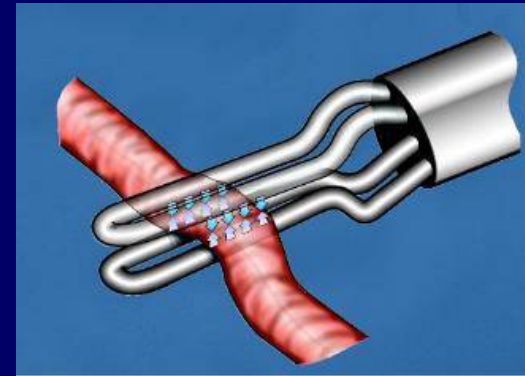
Cutting can be achieved



# Tripolar Electrosurgery

4 functions in one and the same instrument namely:

- Dissecting,
- Grasping,
- Bipolar Coagulation and
- Bipolar Cut.



# Harmonic Scalpel

**Mechanical energy at  
55,500 vibrations / sec.**

**Disrupts hydrogen  
bonds & forms a  
Coagulum**

**Temperature**

**HS - 80 - 100 ° C**

**Electro coagulation  
- 200 - 300 ° C**

**↓Collateral damage, ↓  
tissue necrosis**



## Ultrasonic Generator



# Hand Piece





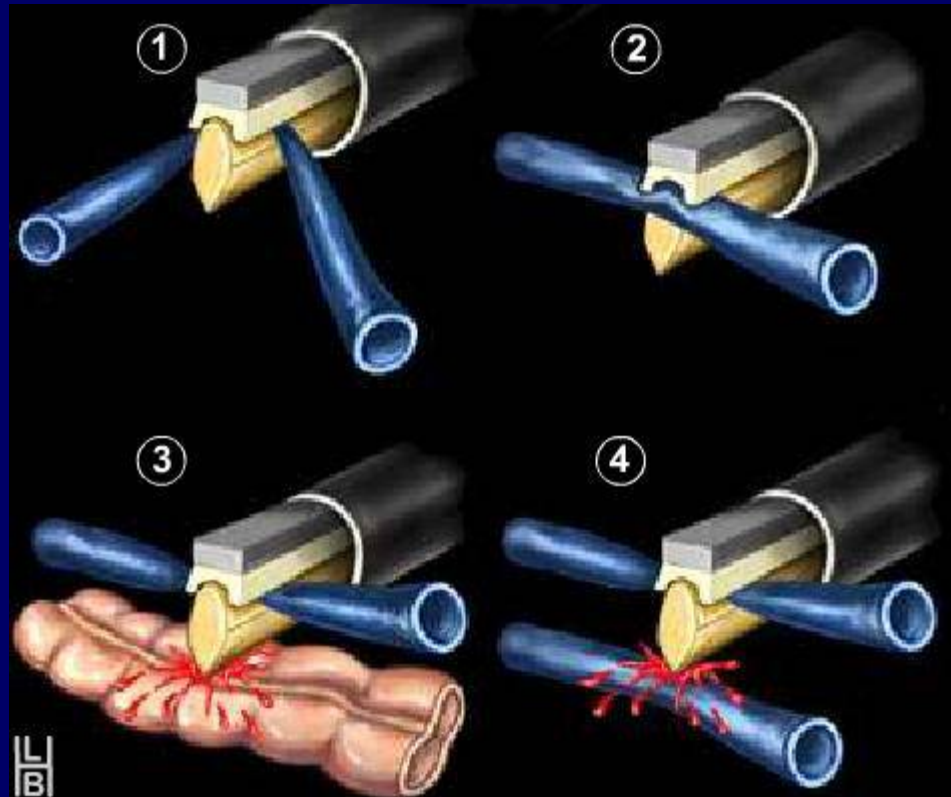
# Harmonic Scalpel



## Piezo-electric Hand Piece



# Injury by Harmonic





# Tissue response electrosurgical generator

- ❑ It can be used with confidence on vessels up to 7 mm
- ❑ It is Bipolar causes minimal thermal spread, confining its effect to the target tissue
- ❑ Unique energy output results in virtually no sticking and charring
- ❑ Minimize need for multiple applications



Ligasure



# Ligasure



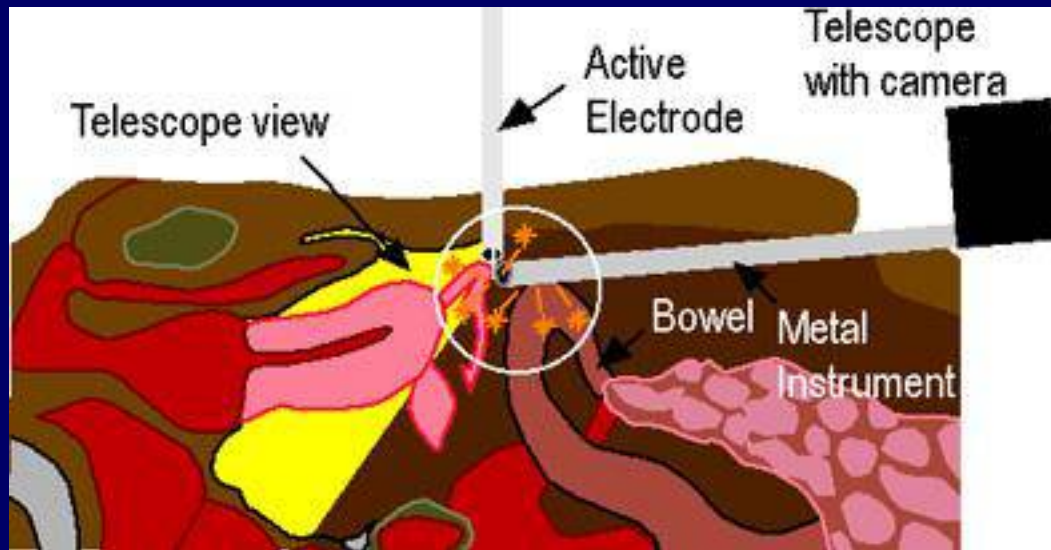


# Safety Considerations in MAS

- Overshooting
- Overcooking
- Direct Coupling
- Insulation Failure
- Capacitive Coupling



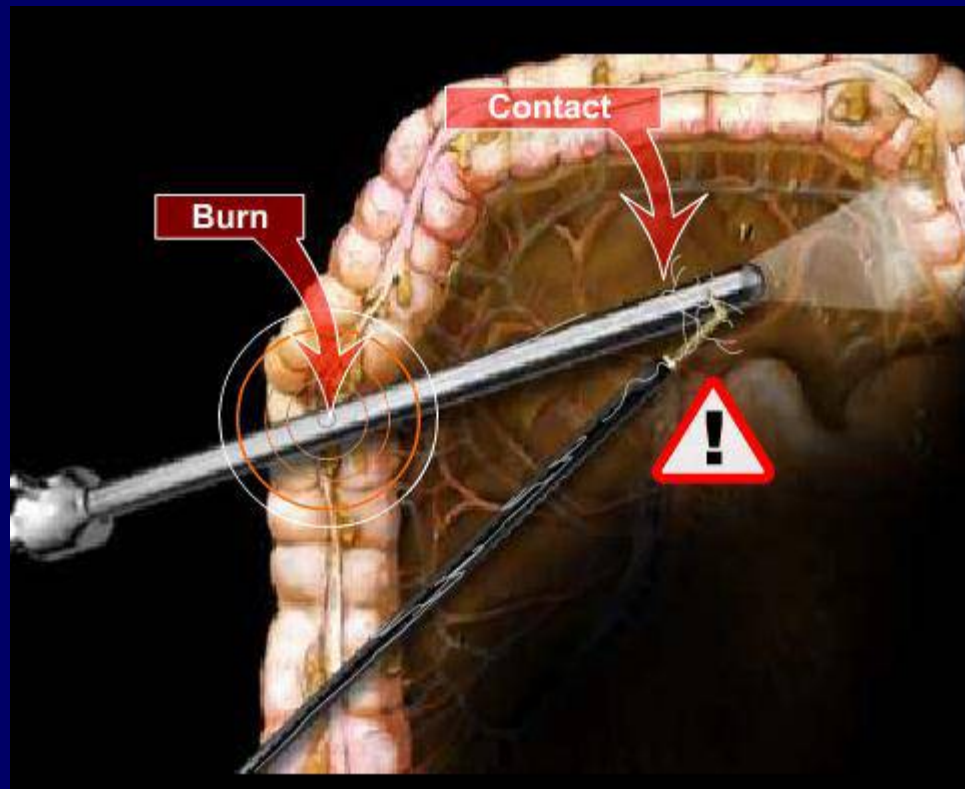
# Direct Coupling



Do not activate the generator while the active electrode is touching or in close proximity to another metal object.



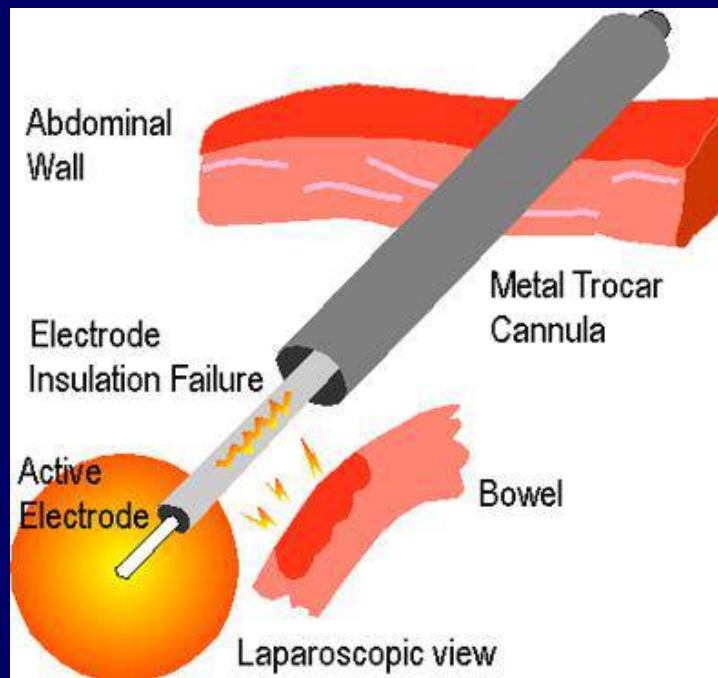
# Direct Coupling



# Direct Coupling



# Insulation Failure



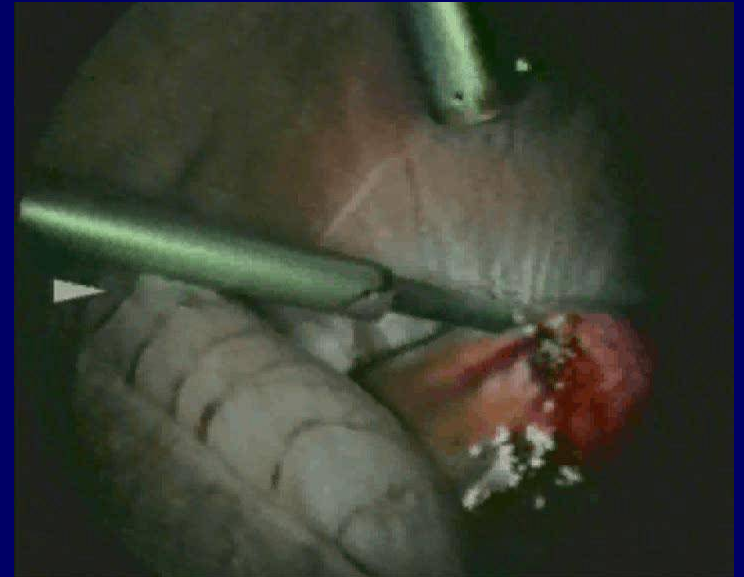


# Insulation Failure

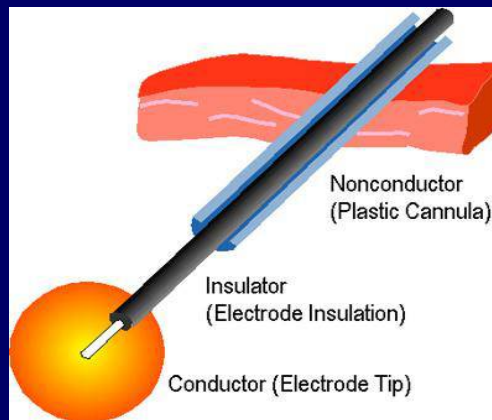
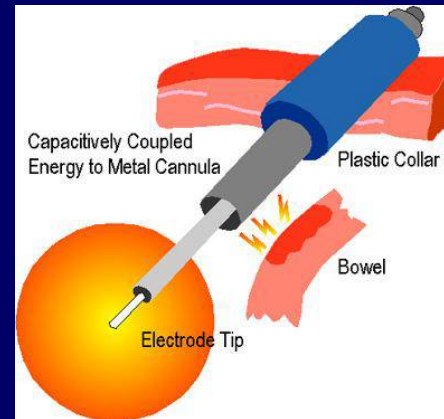
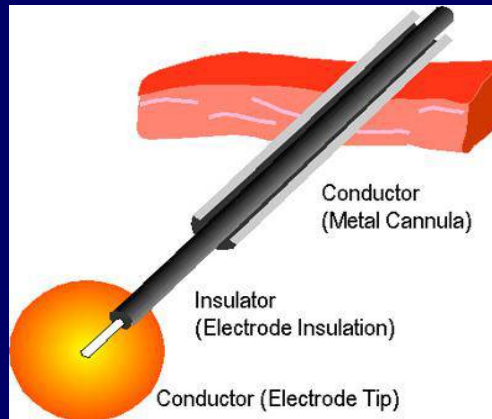




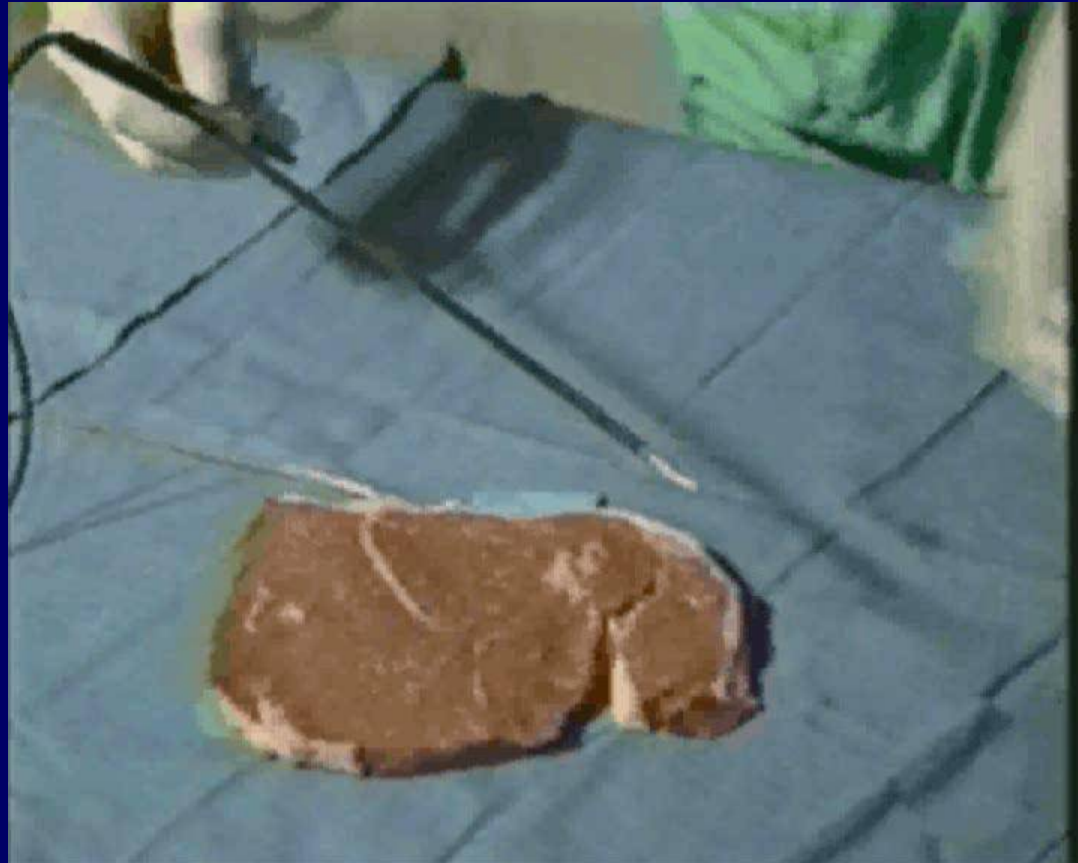
# Insulation Failure



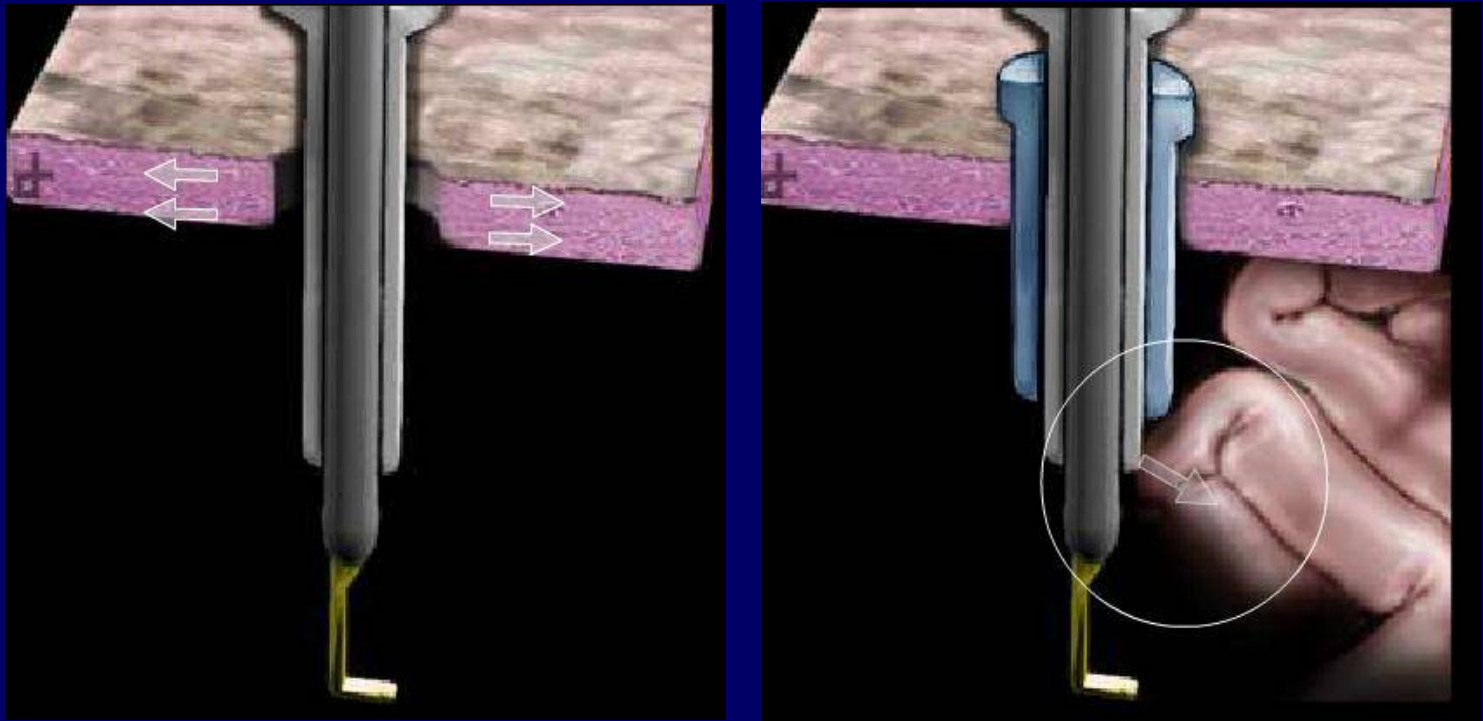
# Capacitive Coupling



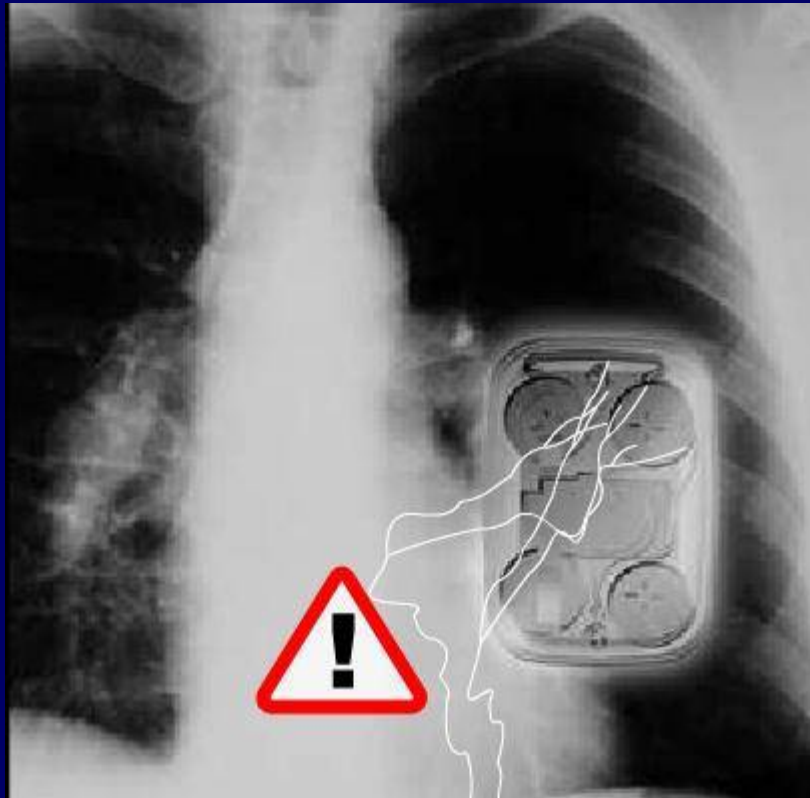
# Capacitive Coupling



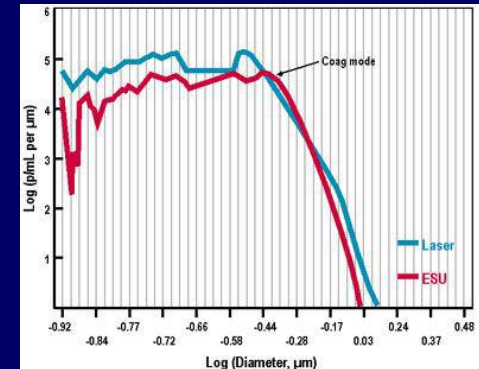
# Capacitive Coupling



# Risk to Pacemaker



# Risk to surgeon



- Burn if inadvertently he or she is a part of circuit
- **Surgical Smoke** Viral DNA, bacteria, carcinogens, and irritants are known to be present in electrosurgical smoke.



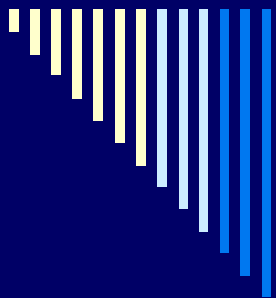


# Recommendations

- ❑ Inspect insulation carefully
- ❑ Use lowest possible power setting
- ❑ Use a low voltage waveform (cut)
- ❑ Use brief intermittent activation vs. prolonged activation
- ❑ Do not activate in open circuit
- ❑ Do not activate in close proximity or direct contact with another instrument
- ❑ Use bipolar electrosurgery when appropriate
- ❑ Select an all metal cannula system as the safest choice. Do not use hybrid cannula systems that mix metal with plastic
- ❑ Utilize available technology, such as a tissue response generator to reduce capacitive coupling or an active electrode monitoring system, to eliminate concerns about insulation failure and capacitive coupling.







“If it counts, count it”

Albert Einstein

Thank  
You



Prof. Cuschieri as our guest in India

