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Special article

25 Years of Laparoscopic Surgery in Spain[☆]



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ABSTRACT

Introduction: The introduction of laparoscopic surgery (LS) can be considered the most important advancement in our specialty in the past 25 years. Despite its advantages, implementation and consolidation have not been homogenous, especially for advanced techniques. The aim of this study was to analyse the level of development and use of laparoscopic surgery in Spain at the present time and its evolution in recent years.

Material and methods: During the second half of 2012 a survey was developed to evaluate different aspects of the implementation and development of LS in our country. The survey was performed using an electronic questionnaire.

Results: The global response rate was 16% and 103 heads of Department answered the survey. A total of 92% worked in the public system. A total of 99% perform basic laparoscopic surgery and 85,2% advanced LS. Most of the responders (79%) consider that the instruments they have available for LS are adequate and 71% consider that LS is in the right stage of development in their environment.

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Conclusions: Basic laparoscopic surgery has developed in our country and is considered to be the standard surgery performed by most surgeons, and forms part of the basic surgical training of residents. With regard to advanced LS, although it is frequently used, there are still remaining areas of deficit, and therefore, opportunities for improvement.

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25 años de cirugía laparoscópica en España

RESUMEN

Palabras clave:

Cirugía laparoscópica
Encuesta de opinión
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Introducción: La introducción de la cirugía laparoscópica (CL) puede considerarse el avance más importante que ha experimentado nuestra especialidad en los últimos 25 años. A pesar de sus ventajas, la implantación y consolidación de la CL no ha sido homogénea, especialmente si tenemos en cuenta las técnicas laparoscópicas avanzadas. El objetivo de este trabajo es analizar el nivel de desarrollo e implantación de la CL en España en el momento actual y analizar su evolución en los últimos años.

Material y métodos: Durante el segundo semestre de 2012 se desarrolló una encuesta que evaluaba distintos aspectos relacionados con la implantación y el desarrollo de la CL en nuestro país. La encuesta se realizó mediante un cuestionario electrónico.

Resultados: La tasa global de respuesta a la encuesta fue del 16% y 103 jefes de Servicio contestaron el cuestionario. El 92% correspondió a cirujanos de centros sanitarios públicos. El 99% de los encuestados realizaba CL básica y el 85,2%, avanzada. La mayor parte de los encuestados (79%) considera que el instrumental y los equipos para CL de los que dispone son correctos y el 71% considera que, en su medio, la CL está en el lugar adecuado.

Conclusiones: La CL básica ha logrado desarrollarse en nuestro país hasta considerarse un estándar practicado por la mayoría de los cirujanos y ser parte de la formación básica del residente de cirugía. Con respecto a la CL avanzada, aunque los porcentajes de utilización son altos, todavía existen déficits y, en consecuencia, oportunidades de mejora.

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Introduction

The introduction of laparoscopic surgery (LS) can be considered as the most important advancement in our specialty in the past 25 years. During this period the results of numerous laparoscopic techniques have surpassed those of the traditional approach, demonstrating advantages that have been found to be clinically significant, improved quality of life and patient management. However, there has been no standardized introduction and consolidation of LS, particularly regarding advanced laparoscopic techniques. Procedures such as cholecystectomy,^{1,2} hiatus hernia and anti-reflux surgery³ and even other more complex surgical interventions such as bariatric surgery⁴ have obtained very high replacement rates to LS. By contrast, other procedures such as surgery of the colon have not obtained their expected LS levels given their high prevalence.⁵

In 2003, the Endoscopic Section of the Spanish Association of Surgeons (AEC in Spanish) conducted a survey among Spanish surgeons, the objective of which was to hear their opinion on LS and become aware of the level of implementation of these techniques in Spain.⁶ This survey reported that although LS was widely accepted for the treatment of cholelithiasis and gastroesophageal reflux disease (GERD), and that hospitals had the sufficient technical means to perform it, it was still rarely used. The aim of our study was therefore to analyse the evolution of LS from its introduction

into Spain 25 years ago, and 10 years after the publication of the abovementioned survey.

The aim of this study was to analyse the level of development and use of laparoscopic surgery in Spain at the present time and its evolution in recent years.

Material and Methods

During the second half of 2012 the project for the development of a survey began to evaluate the different aspects relating to the introduction and development of LS in Spain. The survey was conducted using an electronic questionnaire (<https://docs.google.com/spreadsheets/viewform?formkey=dE9ob1F-maFJTvlpPbko4OXByc04tLWc6MQ>) and published through the AEC's electronic media.

The questionnaire consisted of a total of 64 questions. Of these, 56 referred to general demographic aspects, equipment availability, and the use of the laparoscopic approach in different groups of disease, training and innovations. Three of the questions were directed only at hospitals accredited to train residents and were about aspects of training. Finally, five questions were directed at department heads. With regard to techniques, only generally accepted ones were explored, with the exclusion of minimally invasive surgery of the thyroid glands and cancer of the oesophagus, liver and head of the pancreas. The Feliu et al.⁶ survey conducted previously was not reproduced completely since it was considered that

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