The Condition:

Diverticulitis, Ulcerative Colitis, Crohn’s Disease, Rectal Prolapse

The colon and rectum are part of your large intestine. The main purpose of these organs is to process and pass waste from your body. There are several conditions that can affect your colon, such as: diverticulitis, ulcerative colitis, Crohn’s disease and rectal prolapse.

Diverticulitis is a condition in which a small pouch forms and inflames inside your colon. The most common symptom is abdominal pain. While diverticulitis has been linked to a low fiber diet, the exact cause is unknown. About 10% of people over the age of 40 have diverticulitis in the U.S. alone.

Ulcerative colitis and Crohn’s disease are jointly known as inflammatory bowel disease (IBD). IBD causes the digestive tract to inflame. Symptoms may include: diarrhea, rectal bleeding, fever and weight loss. Five million people worldwide have IBD, but the exact cause is unknown.

Rectal prolapse occurs when tissue lining the rectum falls into the anus. The condition is more common in the elderly, and is often linked to constipation.
Treatment options often depend on how severe your symptoms are, how many episodes you have experienced, your age and overall health. If medicine and lifestyle changes do not ease your symptoms, your doctor may recommend surgery.

There are several types of operations that can be performed on your colon. When doctors remove the affected part of your colon and join together the remaining healthy bowel, this is known as a colectomy or colon resection. Surgery on your right colon is called a right colectomy; surgery on your left colon is a left colectomy; and surgery on the sigmoid colon (lower left part of your colon before your rectum) is called a sigmoid colectomy. When your entire colon is removed, it is called a total colectomy.

Colorectal procedures are often performed with open surgery, which requires a large incision. The incision must be large enough for your surgeon to fit his or her hands and surgical instruments inside your body. Open surgery allows doctors to touch your organs as they operate.

Colorectal procedures can also be performed using minimally invasive surgery (laparoscopy). This means your surgeon operates through a few small incisions in the abdomen using long-handled instruments and a tiny camera. The camera sends images to a video monitor in the operating room to guide your surgeon during the operation.

There is another minimally invasive surgical option for patients facing colorectal surgery: state-of-the-art da Vinci Surgery.
da Vinci Surgery:
A Minimally Invasive Surgical Option

If your doctor recommends surgery for diverticulitis, ulcerative colitis, Crohn’s disease or rectal prolapse, ask about minimally invasive da Vinci Surgery.

Using the da Vinci System, your surgeon makes a few small incisions - similar to traditional laparoscopy. The da Vinci System features a magnified 3D HD vision system and tiny wristed instruments that bend and rotate far greater than the human wrist. These features enable surgeons to operate with enhanced vision, precision, and control.

As a result of da Vinci technology, da Vinci Colectomy offers the following potential benefits:

- Precise removal of cancerous tissue
- Low blood loss
- Quick return of bowel function
- Quick return to a normal diet
- Low rate of complications
- Low rate of converting to open surgery compared to traditional laparoscopy
- Short hospital stay
- Small incisions for minimal scarring

Risks & Considerations Related to Colectomy & da Vinci Surgery:

Leaking and/or narrowing at the spot where two sections of bowel were reconnected, anal dysfunction (cannot empty bowel, frequent bowel movements, leakage or constipation).