

LAPAROSCOPIC TREATMENT OF DUODENAL ATRESIA IN NEWBORNS – PRELIMINARY EXPERIENCE

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Introduction. Duodenal atresia is the most common type of congenital small bowel obstruction in newborns. Its incidence is estimated at 1 per 20 000 newborns. This disorder requires early recognition. Currently, the use of prenatal ultrasonography facilitates diagnosis during the third trimester of pregnancy. Treatment involves the restoration of the gastrointestinal tract by placing a shunt during the first days following birth. The last decade witnessed the development of minimally invasive techniques for treating the youngest patients.

Aim. To present preliminary experiences with respect to laparoscopic treatment of duodenal atresia.

Materials and methods. In 2010, we performed 3 laparoscopic repairs of duodenal atresia in infants.

Results and discussion. In the immediate postoperative period fast recovery of the gastrointestinal function occurred; no postoperative wound complications were observed. In 2 cases a correct gastrointestinal passage was achieved. In the 3rd case, shunt obliteration occurred 3 weeks following the surgery, and required resurgery with a classic laparotomy.

Conclusions. Laparoscopy employed in the treatment of duodenal atresia in newborns is technically demanding; however, as experience is gained by the operating team, this technique can become a valuable method with all the advantages of minimally invasive surgery.