

Occurrence of Skin Lesions by Surgical Positioning in Cancer Patients Subject to Robotic Urologic Surgery

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BACKGROUND: When performing a surgical procedure, the patient is exposed to various situations that may compromise their physical, mental and emotional integrity during the perioperative period. Among these situations, we will give a special focus to the surgical positioning. Surgical patients during the intraoperative period, are susceptible to developing various complications, the most common one being pressure ulcers. Oncologic surgical patients who underwent surgery with robotic technology can be categorized as high risk for development of skin lesions and pressure ulcers caused by the surgical positioning. In this context, this study aimed to identify how many cancer patients who underwent the robotic urologic surgery had skin lesions by surgical positioning.

HYPOTHESIS: Cancer patients undergoing robotic urologic surgery to have a high risk of developing skin lesions by surgical positioning. The following factors contribute to the occurrence of pressure ulcers: age, gender, laterality, surgery duration, surgical positioning time, anesthesia time, type of surgical procedure, operating table of angulation in the Trendelenburg position and time surgeon stay on the console. From this analysis, we assume that cancer patients who underwent robotic urologic surgery must show skin lesions by surgical positioning during the study period.

METHODS: The design of the research is quantitative, documentary and retrospective type. This research was conducted in a surgical center of a cancer hospital, which performs about 1,000 surgeries per month, and 40 surgeries are performed with robotic technology and therefore 85% are robotic urologic surgery. Data were collected from all patients who underwent robotic urologic surgery during the year 2015, a total of 359 surgical procedures. At this stage, data were collected through a registration document of robotic surgeries called "SAEP Robotics", stored in a computerized database, called MV2000. Thus, a data collection instrument was designed to facilitate the cataloging of data in a spreadsheet and then graphing. Based on these data, graphics developed to represent the profile of cancer patients who underwent robotic urologic surgery, associated with the occurrence of skin lesions by surgical positioning during the study period.

RESULTS: It was concluded that the occurrence of skin lesions in cancer patients who underwent robotic urologic surgery, which may be associated with surgical positioning in this study was zero. After the result of this research, it was found the effectiveness of skin injury prevention protocol, which refers to all types of surgical positioning, including robotic surgery. Since the multidisciplinary effort is one of the key strategies to ensure patient safety in robotic surgical positioning.