

Key References for Percutaneous Laparoscopy

MiniLap® Systems

MiniLap® Platform

1. McCarus SD. *Surg Technol Int.* 2013;23:129-132.

Although this article is not high-quality evidence, it is a clear description of the practical use of the MiniLap System in hysterectomy.

2. Dan AG, et al. *JSLs.* 2013;17: 578-584.

Single-center prospective study of the feasibility, safety, and efficacy of cholecystectomy with two-trocar strategic laparoscopy for improved cosmesis (SLIC) using the MiniLap System. This manuscript provides comparative, quantitative evidence for SLIC using the MiniLap System vs multiport and SILS.

3. Botkin C, et al. *Can. J. Surg.* 2014; 57(3):155-156.

Describes the use of the MiniLap System to manipulate the gallbladder fundus in SILS cases (cholecystectomies) on children, facilitating a more conventional approach yet leaving only a small puncture wounds in the right upper quadrant of the abdomen.

Additional References

(Please note that each of the meta-analyses cited below include data from a variety of studies conducted globally, including in the US).

1. Hao L, et al. *Surg Laparosc Endosc Percutan Tech.* 2012;22:487-497.

Meta-analysis of 15 randomized controlled trials (RCTs) showed improved cosmesis and reduced pain for single-incision laparoscopic cholecystectomy compared with conventional techniques. This study also showed longer operative times for the single-incision technique with no differences in conversion rates, adverse events, analgesia requirements, or length of hospital stay.

2. Qiu J, et al. *J Laparoendo & Adv.* 2013;23:815-831.

Meta-analysis of 16 RCTs and 24 non-randomized comparative studies indicated that single-port laparoscopic cholecystectomy was safe and effective with improved cosmetic results compared with conventional techniques.

3. Zehetner J, et al *Surg Laparosc Endosc Percutan Tech.* 2013;23:235-43.

Systematic review and meta-analysis of 9 RCTs showed improved cosmetic satisfaction and similar overall satisfaction, hospital stay, and postoperative pain for single-access laparoscopic compared with conventional laparoscopic cholecystectomy. Operative time was significantly longer for the single-access technique.

4. Li L, et al. *PLoSOne.* 2014;9(2):e90313.

Network meta-analysis of 43 RCTs evaluating different kinds of cholecystectomy. Results suggested that compared with conventional techniques, mini-4-port cholecystectomy had high cosmetic score and fewest postoperative complications; single-port cholecystectomy was associated with reduced postoperative pain and short hospital stay.

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