

Robotic reconstructive urology across five centers

69 patients, nine surgeons
and no reported major
complications or
conversions

EARLY MULTICENTER EXPERIENCE
Retrospective cohort across a broad range
of reconstructive procedures

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ROBOTIC RECONSTRUCTION: EARLY OUTCOMES

69 patients 5 centers 9 surgeons Median age 42 years (6–76)

AIM AND METHODS

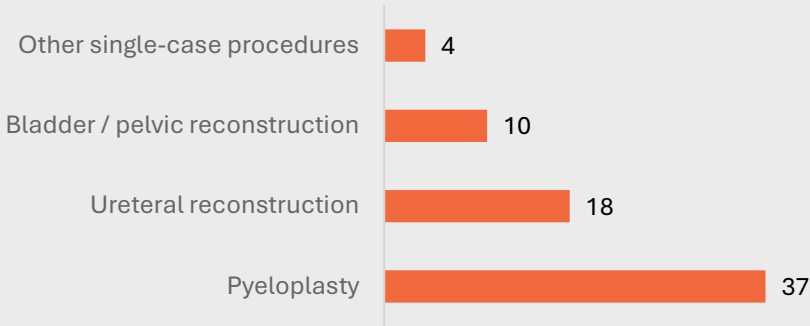
Retrospective review of robotic
reconstructive urologic surgery. We
assessed procedure type, operative time,
blood loss, hospital stay and Clavien–
Dindo complications.

PERIOPERATIVE FINDINGS

Operative time: 28–297 min
Blood loss: 10–200 mL in most cases
Hospital stay: median 2–5 days
Conversions: 0; Clavien ≥III: 0

PROCEDURE MIX

Pyeloplasty 37
Ureteroureterostomy 6
Ureteroileal repair after RARC 6
Ureteroneocystostomy 6
Augmentation ileocystoplasty 3
Vesicovaginal fistula repair 3
Y–V plasty 2
Bladder neck stricture repair 2
Other single-case procedures 4



INTERPRETATION

This early multicenter series shows feasibility across several procedures with low reported perioperative morbidity. The range of procedures performed across five centers suggests that robotic reconstruction is feasible in different clinical settings. Because this is a retrospective series without reported long-term follow-up, the findings cannot establish durable clinical success.