



THORAPLER in RATS Upper Left Lobectomy for Adenocarcinoma N2 at the Aortopulmonary Level

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Cirugía Torácica Provincia de Tarragona Hospital Joan XXIII

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I. Case Background

This case represents a challenging thoracic oncology procedure involving upper left lobe adenocarcinoma with N2 disease at the aortopulmonary level.

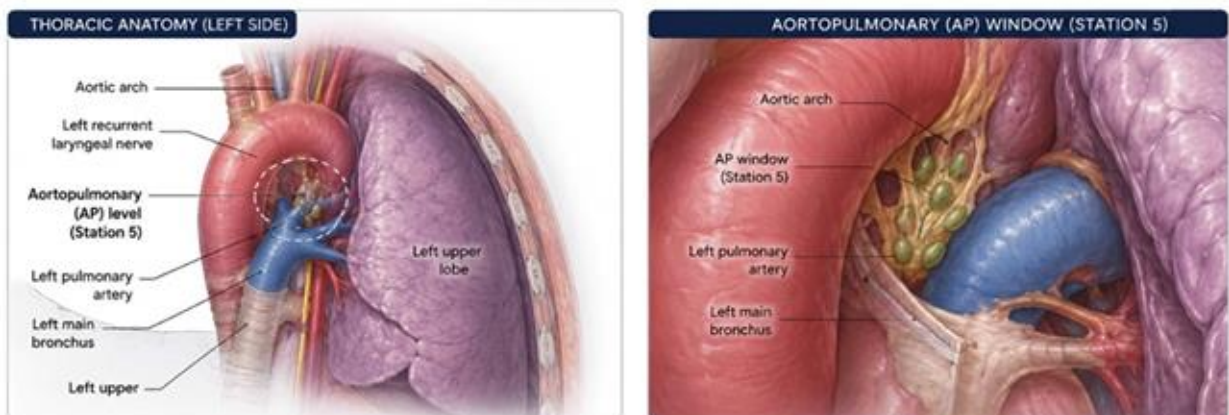
The procedure was performed at Hospital Joan XXIII in Tarragona, Catalonia, Spain, by Dr. Pau Rodriguez and the Thoracic Surgery Department.

Resection in the aortopulmonary region requires meticulous handling of vascular, bronchial, and pulmonary parenchymal structures, demanding precise tissue management and reliable transection across tissues of varying thicknesses.

★ Special

- N2 adenocarcinoma at the aortopulmonary level
- Robotic-assisted left upper lobectomy
- Multi-tissue applications using a single stapling platform

II. Surgical Approach and Key Techniques



A robotic-assisted upper left lobectomy was performed for adenocarcinoma with N2 involvement at the aortopulmonary level.

The procedure required precise dissection and anatomical division of vascular structures, bronchus, and pulmonary parenchyma within a confined thoracic operative field. Particular attention was directed to tissue handling and stapler positioning to facilitate safe transection across structures with varying thicknesses and mechanical properties.

THORAPLER was utilized as the exclusive stapling platform throughout the procedure. Tissue-specific reload selection was applied according to the characteristics of each target structure, supporting a standardized approach to vascular, bronchial, and parenchymal division.

III. THORAPLER Application

White Reloads – Vascular Applications

White reloads were used for vascular firing, allowed controlled vascular transection with consistent staple formation and secure tissue compression.



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Green Reloads – Pulmonary Parenchyma and Bronchus

Green reloads were used for pulmonary parenchymal and bronchial division, provided appropriate compression and staple formation for thicker tissue structures, supporting reliable tissue transection during lobectomy.



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Complete Procedure Performed with THORAPLER

A notable aspect of this case was that the procedure was performed entirely with the THORAPLER platform.

The use of a 3D two-row stapling system across vascular, bronchial, and parenchymal applications demonstrated its versatility in managing multiple tissue types encountered during anatomical lung resection.



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3D Tile-Shaped Staple Reload

Innovative 3D Tile-shaped Staple Improving hemostasis and more secure prevention of air leakage. Encircling structure with a shingle-like arrangement, staggered layout, and a perfect fit. •...

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✓ 3D Two-Row Stapling System

- Secure vascular and bronchial closure
- Consistent staple line performance throughout the procedure

✓ 8mm Ultra-Slim Shaft

- Facilitated access to the aortopulmonary region
- Enhanced maneuverability in restricted thoracic anatomy

✓ Single-Platform Versatility

- Supported vascular, bronchial, and parenchymal applications
- Enabled completion of the procedure using a single stapling platform

IV. Clinical Significance

This case demonstrates the applicability of THORAPLER in complex thoracic surgical procedures requiring the management of tissues with substantially different structural characteristics.

By utilizing white reloads for vascular applications and green reloads for pulmonary parenchyma and bronchus, the procedure was completed using a tissue-specific stapling strategy while maintaining consistency throughout the operation.

The successful use of THORAPLER as the 2-row stapling system highlights its adaptability and utility in thoracic surgical practice.

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