

Commentary on robotic bronchoplasty

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Lee and Associates have briefly described three robotic broncho-plastic operations. The authors conclude that robotic assisted thoracoscopic surgery offers specific advantages over conventional thoracoscopic surgery and in general we agree. The main advantages are technical given the wristed instruments. However, many skilled VATS surgeons would argue, and rightfully so, that they can do it just as well with VATS instruments. Until there is data on the subject it remains a matter of opinion. In this well written article (1), that has an N of 3, the authors show safety and feasibility.

In general we do share the authors' opinion. Robotic broncho-plastic type surgery is probably technically easier to perform than video assisted thoracoscopic broncho-plastic type surgery.

We have now performed eight robotics sleeve resections and too many to count broncho-plastic procedures.

We continue to recommend that data driven articles on these issues are needed. The articles should show data that

represent quality metric points: length of stay, number of lymph nodes resected, local recurrence rates; both in the airway and in the pulmonary parenchyma. Also, 30 and 90 days survival data is needed.

We congratulate the authors on their fine work.

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Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

References

1. Yang SM, Kuo SW, Lee JM. Robot-assisted thoracoscopic bronchoplasty. *J Vis Surg* 2015;1:20.

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