

# 복강경 수술

## Laparoscopic Surgery

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### *Abstract*

More than 17 years have elapsed since the introduction of the laparoscopy in the surgical field. The principal characteristics of the laparoscopic surgery that differ from the conventional open surgery are pneumoperitoneum is achieved by the insufflation of CO<sub>2</sub> into the abdominal cavity, injury to the abdominal wall is minimized by the use of three to five 5~12 mm trocars, intraabdominal organ and tissue manipulation is reduced and the operative field becomes less dry as the abdominal cavity is not exposed to the room environment. These factors, especially the minimized wound and tissue manipulation, are responsible for the reduced postoperative neuroendocrine and cytokine reactions, decreased pulmonary complications, rapid return of bowel functions, reduced rate of wound complications and the lower incidence of postoperative adhesions. These differences are clinically reflected by a decreased postoperative pain, reduced hospital stay, diminished incidence of postoperative complications and a rapid return to work. To date, laparoscopic surgery is applied to almost all fields of surgery and its indication is expanding everyday. Currently performed laparoscopic procedures include laparoscopic cholecystectomy, laparoscopic appendectomy, diagnostic laparoscopy, laparoscopic herniorrhaphy, laparoscopic fundoplication, laparoscopic Heller myotomy for esophageal achalasia, laparoscopic surgery for solid organs such as the laparoscopic splenectomy and laparoscopic adrenalectomy. Advancements in the laparoscopic instruments and technique have allowed the performance of laparoscopic common bile duct exploration, laparoscopic colonic and gastric resections. Once considered a contraindication due to the risk of air embolism and massive bleeding, laparoscopic hepatic resection is being performed nowadays and reported in the literature. In conclusion, in the near future, with further technological improvement, laparoscopic surgery would almost completely replace the conventional open surgery.

**Keywords :** Laparoscopic Surgery; Laparoscopic Cholecystectomy;  
Pneumoperitoneum; Abdominal Wall

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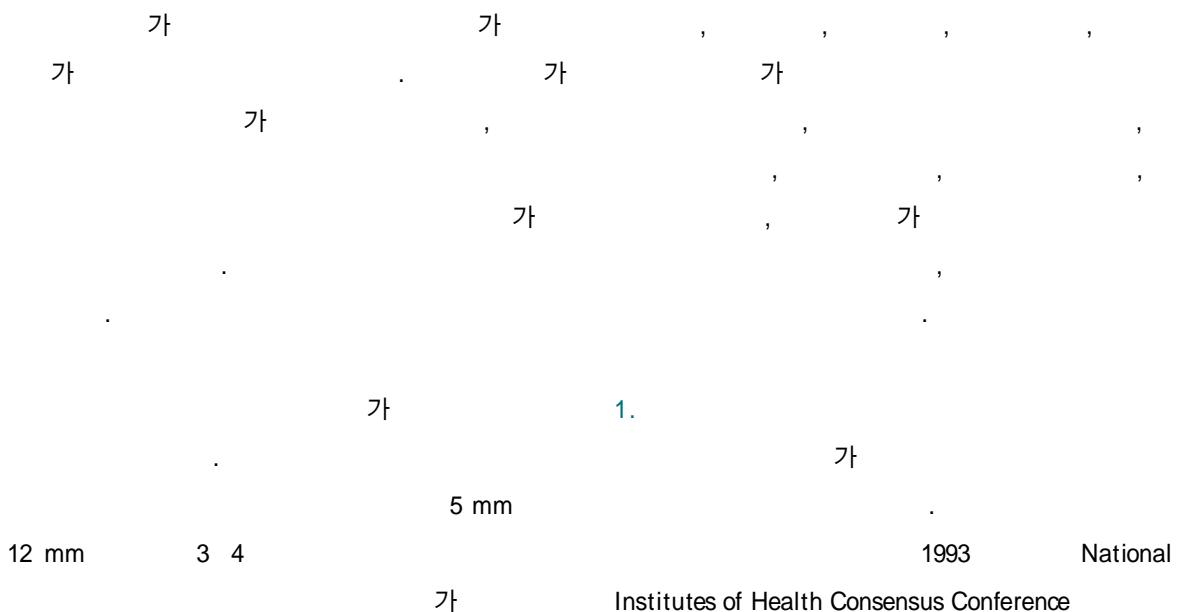
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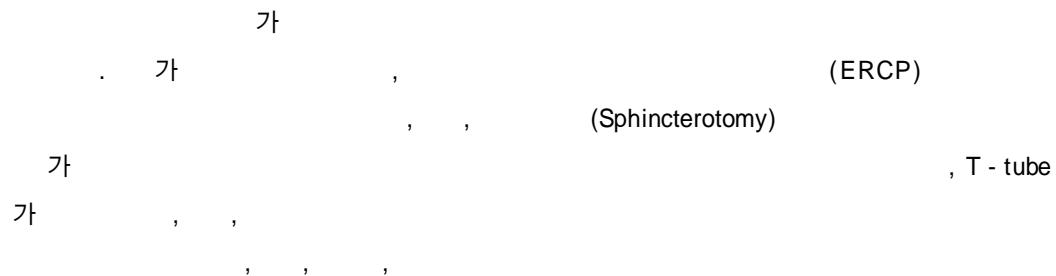
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