



# Advances in Robotic Technology

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# Disclosure

**No Financial Relationships With Any  
of the Companies and Their  
Products**

# Do I Love of Intuitive?



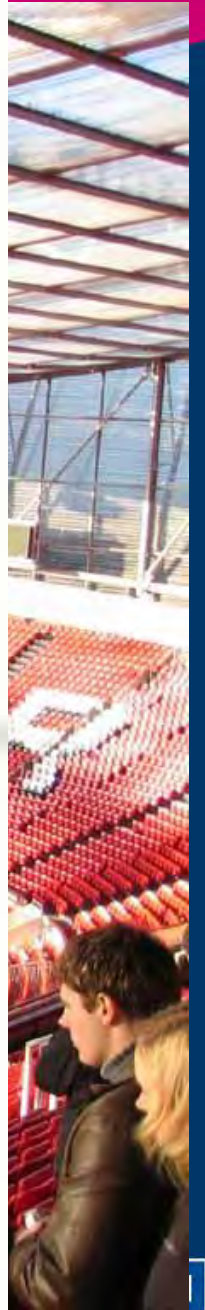
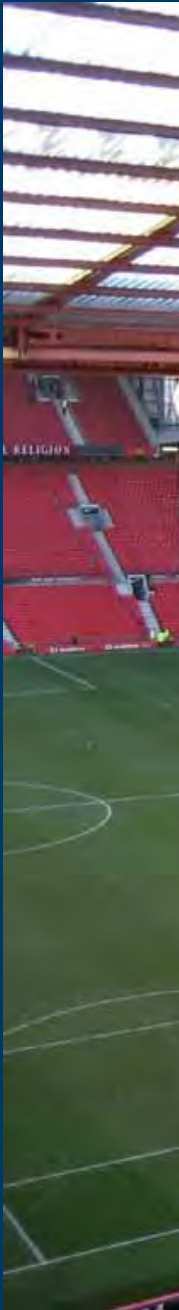


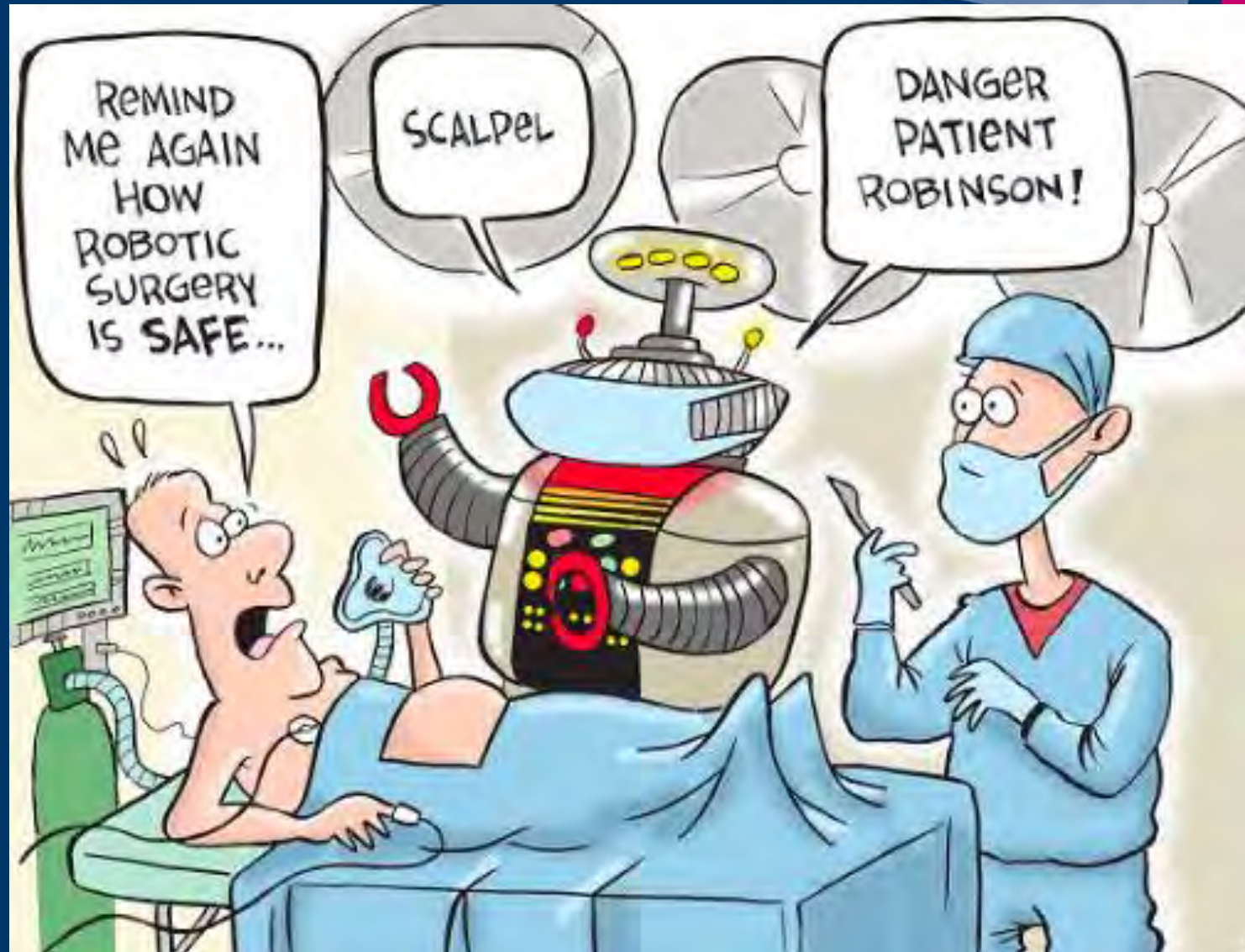
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THE UNIVERSITY HOSPITAL



Albert Einstein College of Medicine  
OF YESHIVA UNIVERSITY





# Why Robotics

- **Less pain**
- **Faster recovery**
- **Less wound complications**
- **Less infections**
- **Less Blood loss and transfusions**
- **Shorter Hospital Stay**

# Technology Components

- **Hardware, size**
- **Ergonomics**
- **Imagery**
- **Simulation**
- **Analytic Feedback on Learning Curve**
- **Cost**

**Clearly not there yet !**

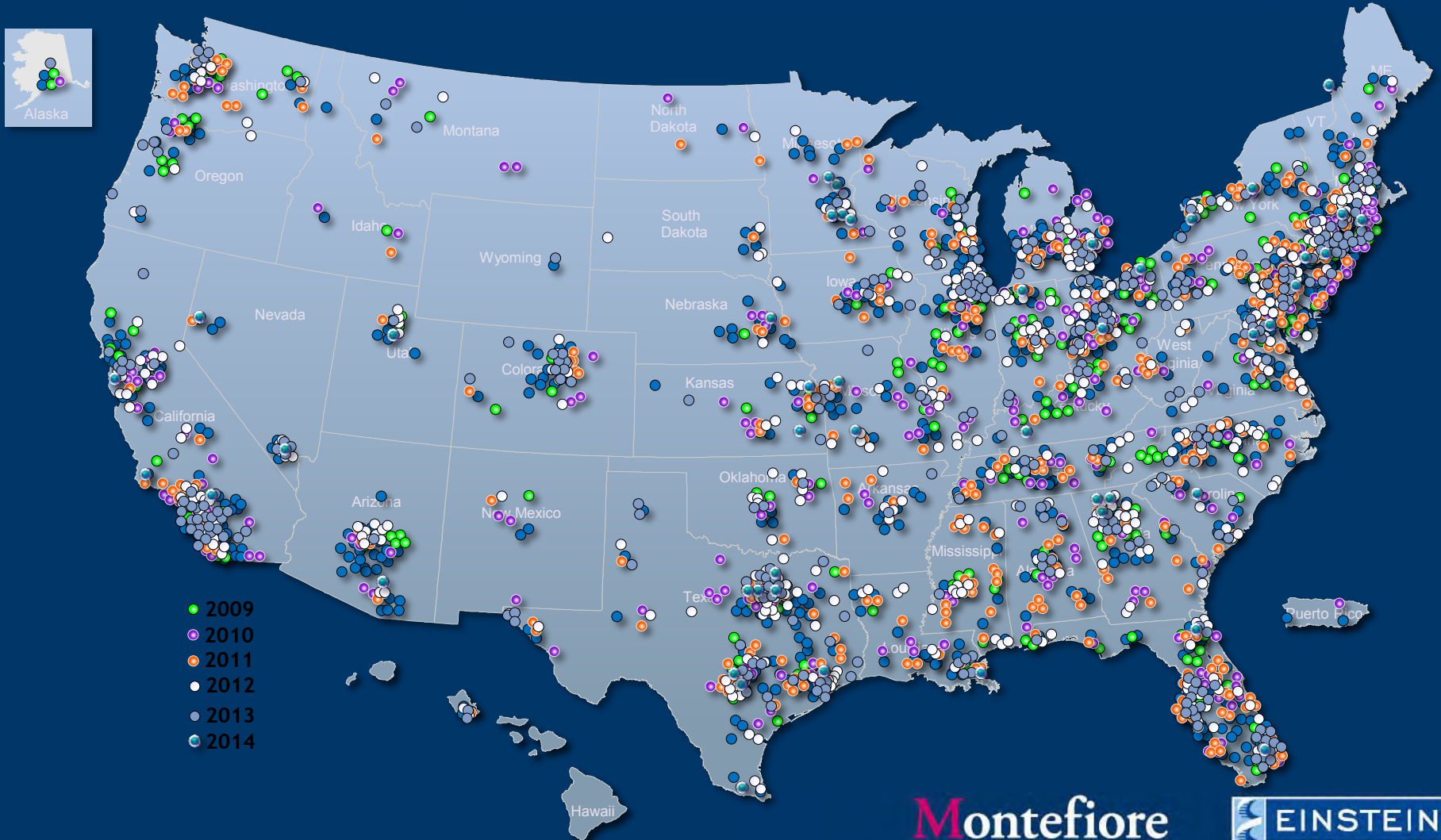






# DA VINCI® SURGICAL SYSTEM U.S. CUMULATIVE INSTALLS

## 2009-2014



# Specialties

- **Urology**
- **Gynecology**
- **Otorhinolaryngology**
- **General Surgery**
- **Cardiac and Thoracic Surgery**



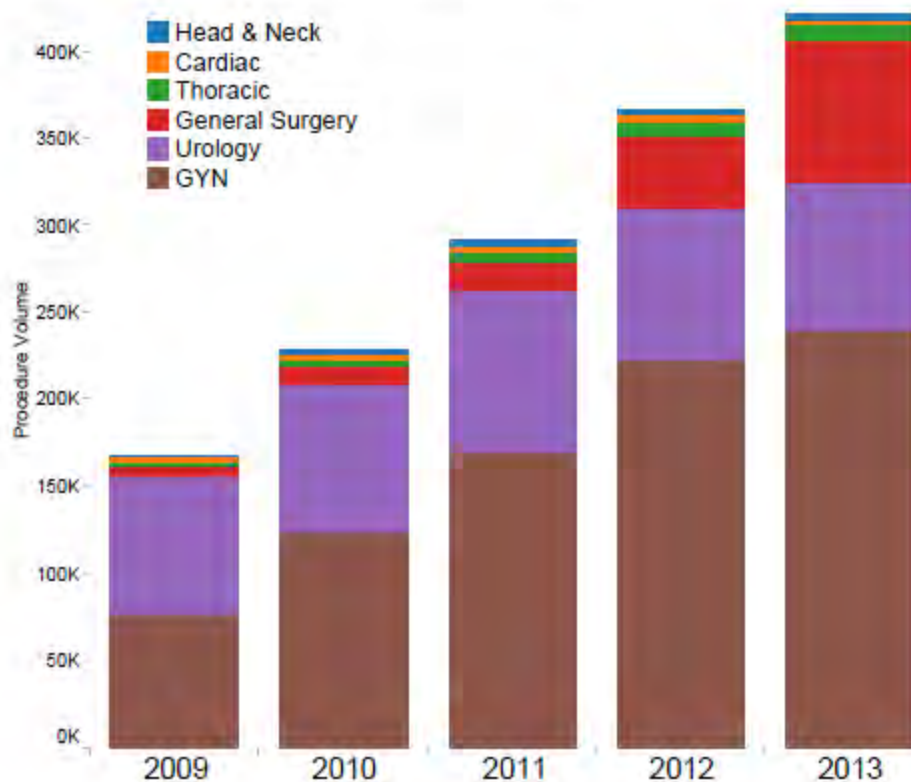
### da Vinci Procedure Volume Growth Rates\*\*

\*\* Growth Rates are calculated as a Compound Annual Growth Rate (CAGR)

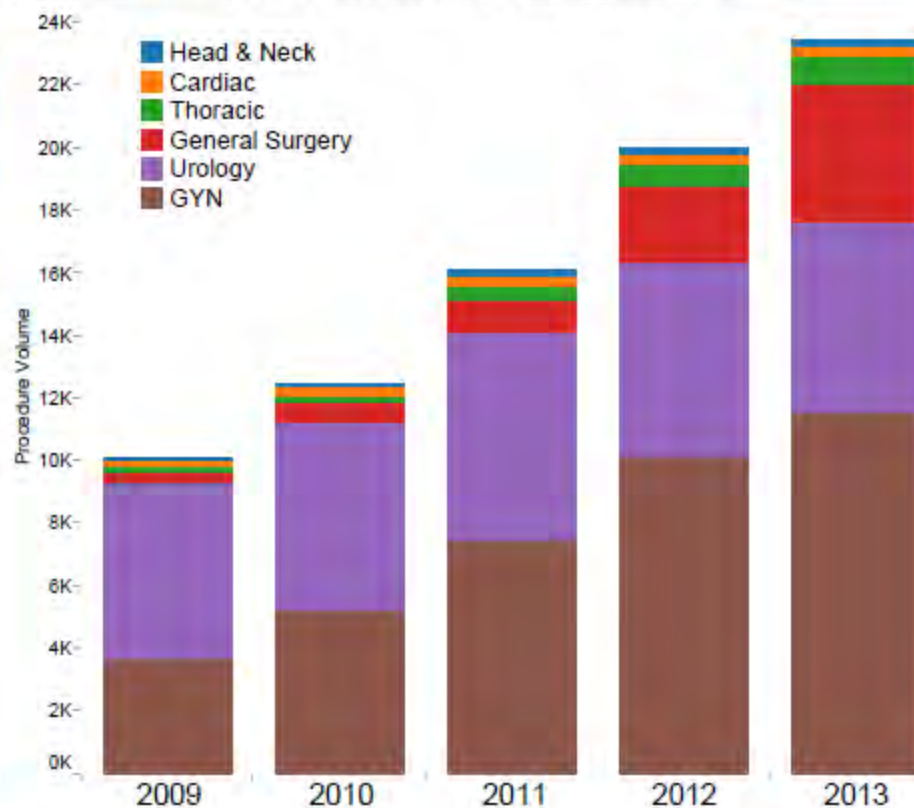
# 24%

### NY da Vinci Procedure Growth 2009-2013

All US daVinci Procedure Volume 2009-2013

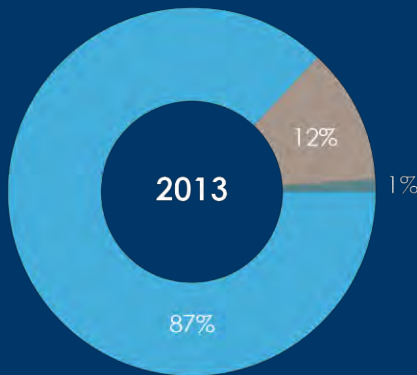
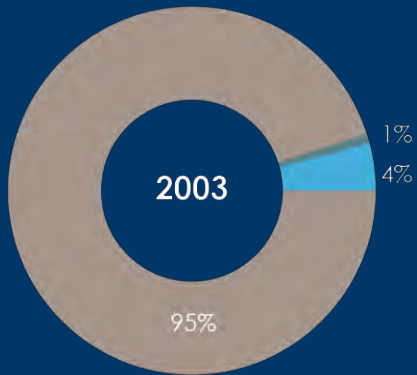


NY da Vinci Procedure Volume 2009-2013

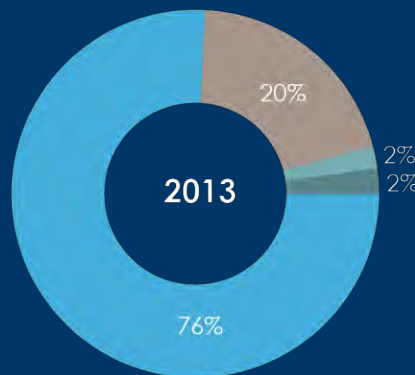
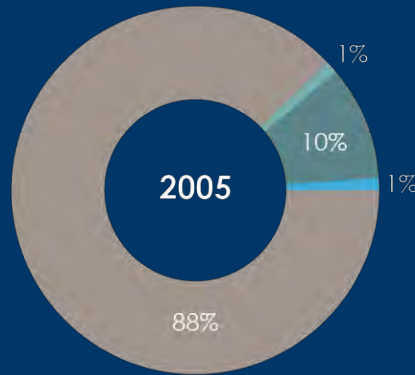


# DaVinci Surgery Has Enabled Minimally Invasive Surgery<sup>1</sup> in Traditionally Open Procedures

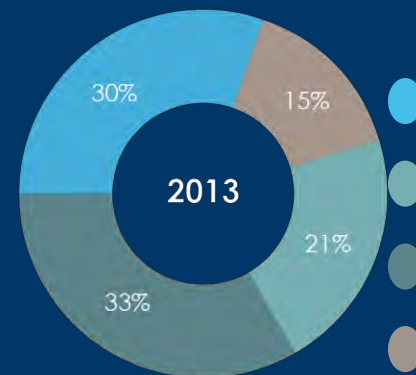
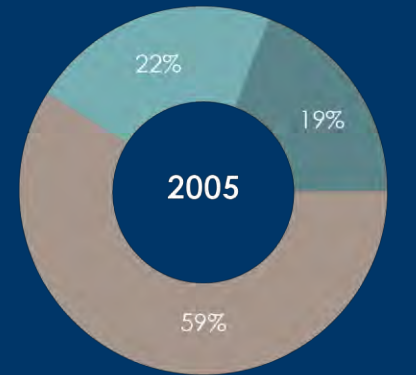
## Prostatectomy

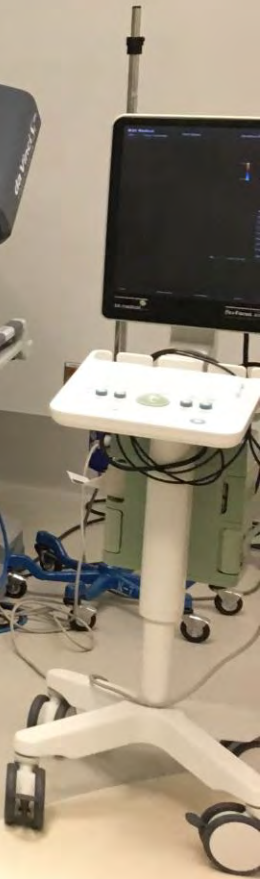


## Hyst-Malignant



## Hyst-Benign





Montefiore  
Spired Medicine





- **da Vinci is undeniably a powerful technology**
- **NOT PERFECT !**
- **There are several improvements and innovations that competitors could offer down the line that stand to greatly advance the field of robotic surgery.**
- **Cost of the da Vinci system a problem**
- **Imperative for improving value and reducing cost in accountable care**

# Competition

- **Healthy**
- **Allows for more innovation**
- **Ultimately drives cost down**

# Competitors

- Titan's Amadeus
- Titan Medical's new *SPORT* system (Single Port Orifice Robotic Technology)
- SOFAR'S Telelap ALF-X (Now Transenterix)
- The Surgibot system (Transenterix)

# Titan Medical Amadeus Prototype



# Titan's *SPORT*<sup>™</sup> Surgical System (Single Port Orifice Robotic Technology)



# Titan's *Sport*™ Surgical System

- a surgeon-controlled single incision robotic platform that includes a 3D vision system and interactive instruments through a single incision.
- a surgeon workstation provides the surgeon with an interface to the robotic platform and also provides a 3D endoscopic view
- The design contemplates a collapsible device that, when collapsed, would be capable of being inserted into the patient's body cavity through a skin incision of approximately 25mm.

# Titan's *SPORT*™ System

- Once inserted, the device is configured to deploy into a working configuration wherein the 3D high definition vision system and interactive multi-articulating instruments would be capable of being controlled by a surgeon at the workstation.
- **Cost ~ \$800,000 vs \$2.1 Mil for da Vinci**

# Mobile Unit !



Titan Medical SPORT™



Intuitive Surgical da Vinci®



## INSTRUMENTS • Workspace & Dexterity

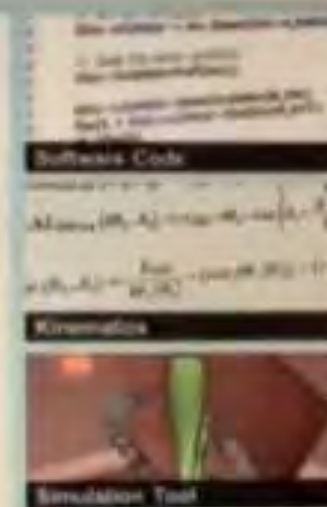


## SURGEON CONTROLS

Enabled user to control robotic instruments through one-to-one movements of the surgeon controllers

Controls system requires minimal learning curve and is a natural extension of the users' arms

Developed simulation and training system





# Telelap ALF-X



# Telelap ALF-X



INNOVATIVE ADVANTAGES FOR PATIENT AND SURGEON

# Telelap ALF-X

- Flexible platform for different specialties
- Up to 4 manipulating arms
- Tactile feedback
- 3D-HD eye-tracking system
- Ease of use to the surgeon and the whole team
- Shorter surgical procedures
- Reusable instruments
- Therefore more accessible and less costly

# Telelap ALF-X

- Each manipulating arm is universal and interchangeable
- It can maneuver the endoscope (or any other surgical instrument) and has an interface for any type of surgical instrument, whether single- or multi-purpose.
- This modularity and adaptability, coupled with the low cost of its instrumentation make it attractive for all surgical disciplines

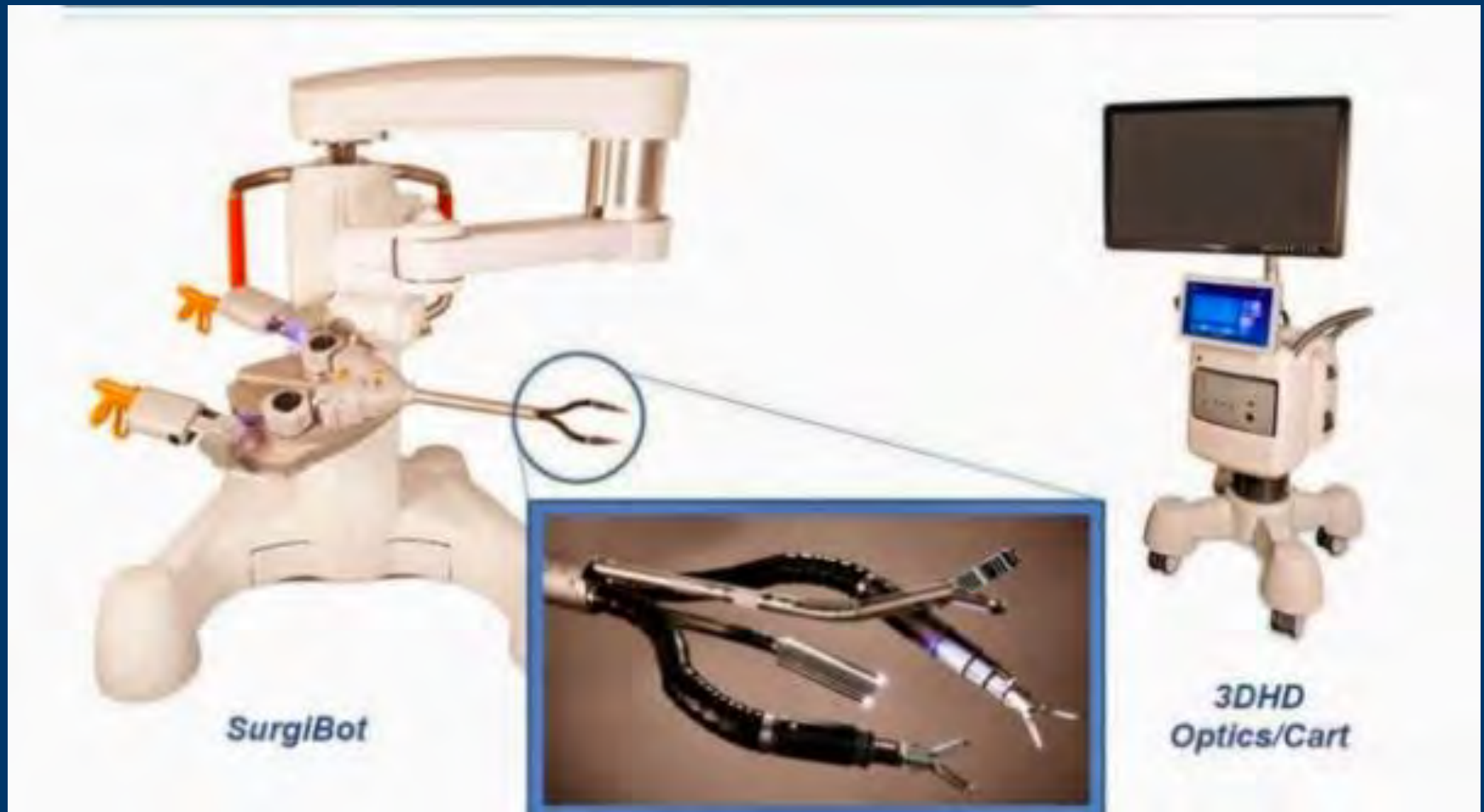




# Telelap ALF-X

- **TELELAP ALF-X gives the surgeon the possibility to maneuver as if using standard laparoscopic handles which naturally**
- **Speeds up familiarization and initial training**
- **Does not alter the movements of the traditional laparoscopic surgery, but increases its efficacy, precision and quality.**
- **Allows sharing the 3D view and hence enhances communication with the other surgeons present in the operating room.**

# SurgiBot System (Transenterix) 1<sup>st</sup> Patient Side Robotic Platform



# SurgiBot System (Transenterix)



# **SurgiBot System (Transenterix)**

- **NC based Research Park Triangle (RPT) company**
- **Robotically enhanced laparoscopy**
- **1st surgical platform designed to address economic and clinical challenges associated with current laparoscopic and robotic options.**
- **A market-expanding technology with a compelling value for a wide variety of surgical facilities**

# SurgiBot (Transenterix)

- **Currently in process of FDA clearance**
- **Recently acquired Telelap ALF-X from Italian company SOFAR for reported \$100M**
- **This combination accelerates the commercialization timeline and revenue ramp as can immediately begin selling the ALF-X in many markets globally.**

# Issue of Learning Curve

- **Competitor's aim at long LC associated with da Vinci**

## Two problems:

- **Longer ORT drives up the cost of surgery**
- **Inexperienced surgeons likely to have worse outcomes**

# Overcoming The Learning Curve

- Increasing flexibility and accuracy of the instruments
- Incorporating haptic feedback
- Improving visualization with superimposed imagery
- Virtual Reality surgery
- Improving surgical simulation with real life surgical simulation modules

**(We are not there yet!)**

# Improving Visualization

Titan's *SPORT*





# Improving the Learning Curve

- **eye-tracking technology allows surgeons to activate instruments, manipulate endoscopes, and control visualization by simply directing their gaze to various parts of the screen.**
- **This feature also has a safety component: the eye-tracking technology would halt an operation automatically whenever the surgeon's gaze moves away from the surgical field.**

# Reducing The Cost Impact

- We need a cheaper alternative.
- Initially Amadeus system < \$600K,
- Titan's *SPORT* \$800,000
- Telelap between \$1M and \$1.3M,
- The Telelap even features reusable instrumentation, which eliminates some of the ongoing costs that can add up to thousands of dollars per case.



# Advances in Imaging and Virtual Surgical Planning for Robotic Partial Nephrectomy

# Dilemma



3/23/11

**Model Tree**

- model
  - tumor
  - ureters
  - artery
  - right kidney
  - pancreas
  - left kidney
  - vein
  - liver
  - spleen
  - skeleton

**Options**

- front
- right
- left
- top
- bottom

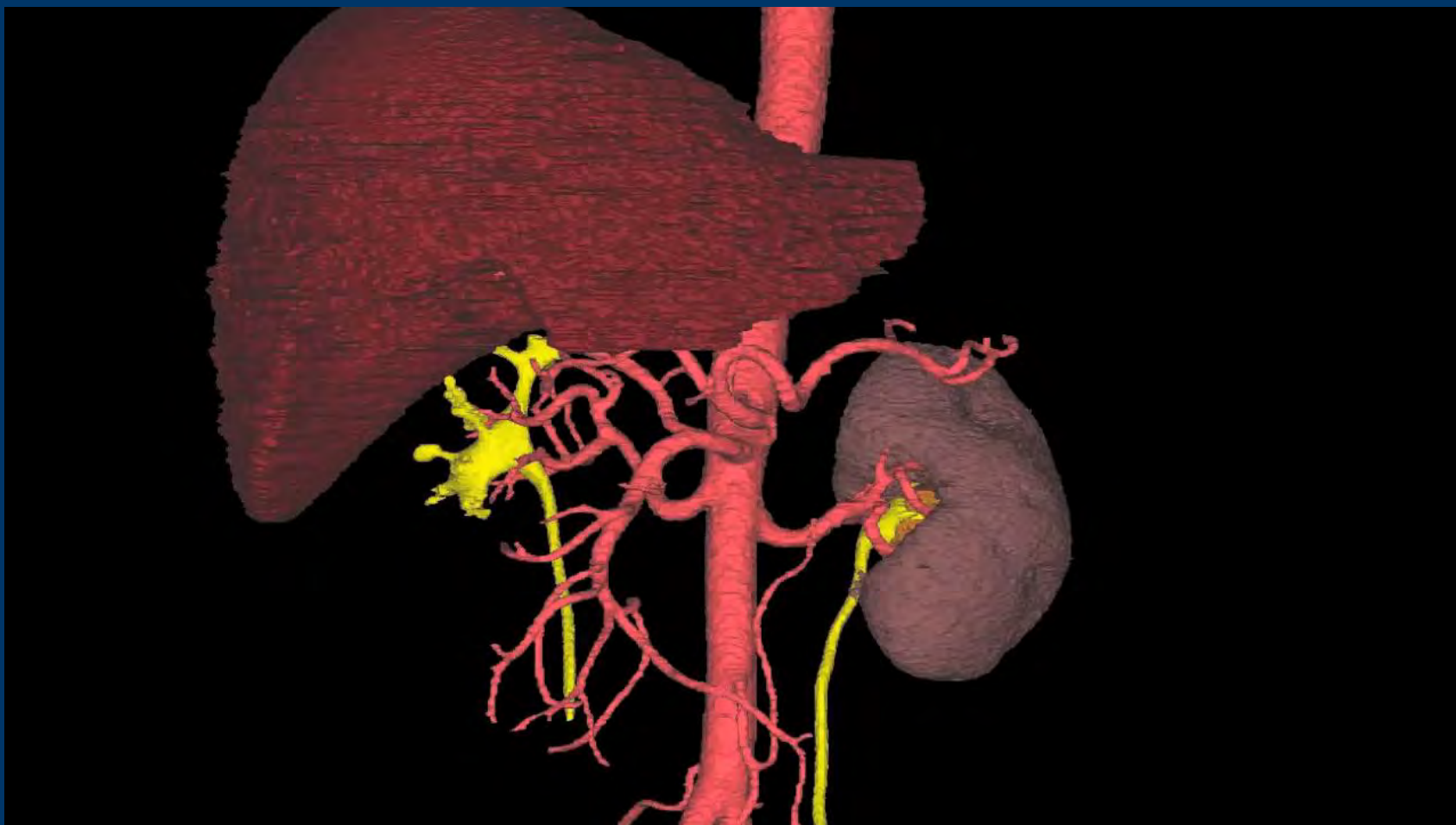
**Volumetric Analysis**

- Tumor: 20,876 mm<sup>3</sup>
- (L) Kidney + Tumor: 229,136 mm<sup>3</sup>
- (R) Kidney Resection: 0 mm<sup>3</sup>
- Kidney Removed (%): ≈0%

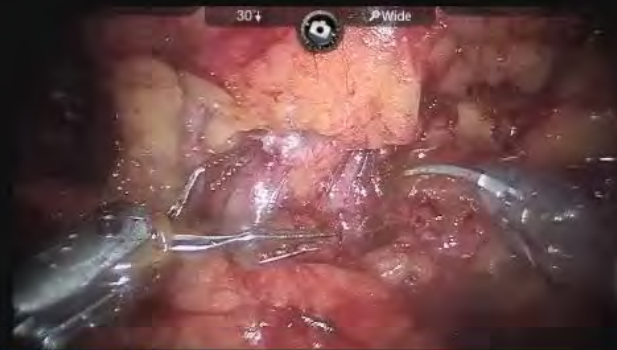
**Legend**

- Tumor
- Ureters
- Artery
- (R) Kidney
- Pancreas
- (L) Kidney
- Vein
- Liver
- Spleen

# Resection Planning

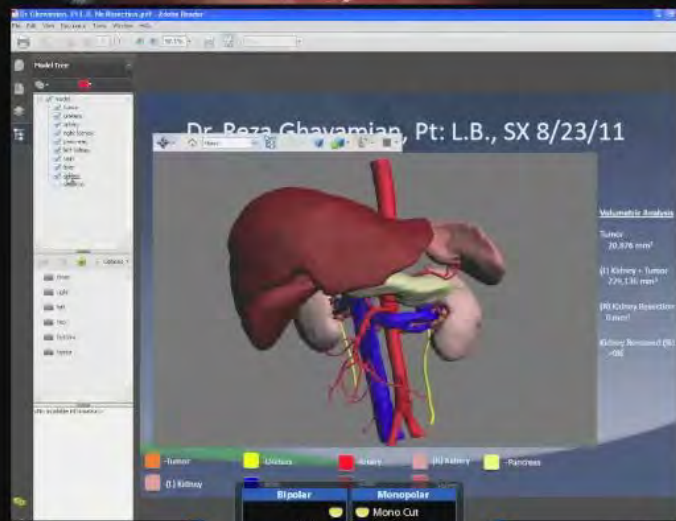


2



3

1



Precise Bipolar Forceps

Monopolar Curved Scissors

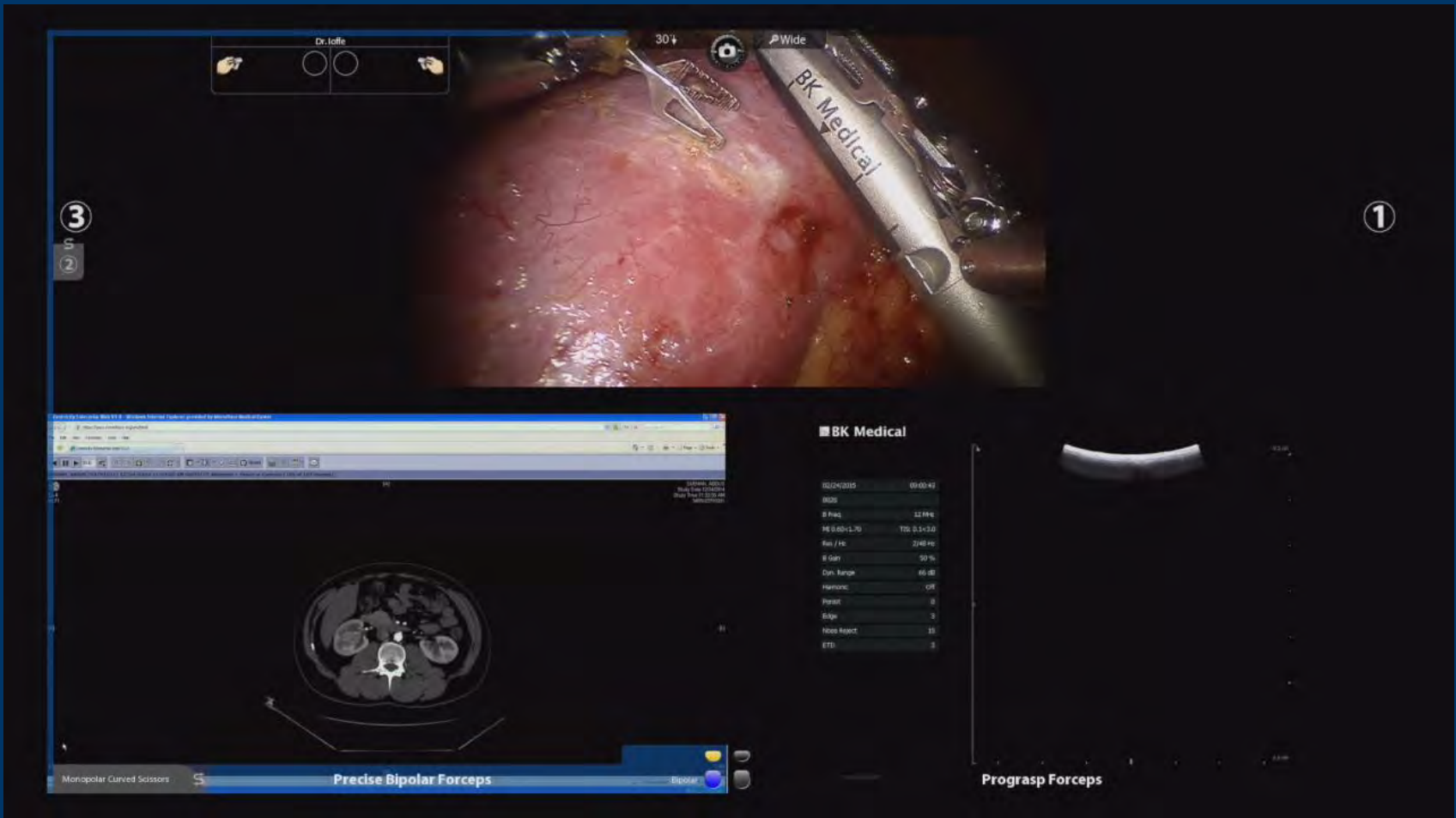
Progress Forceps



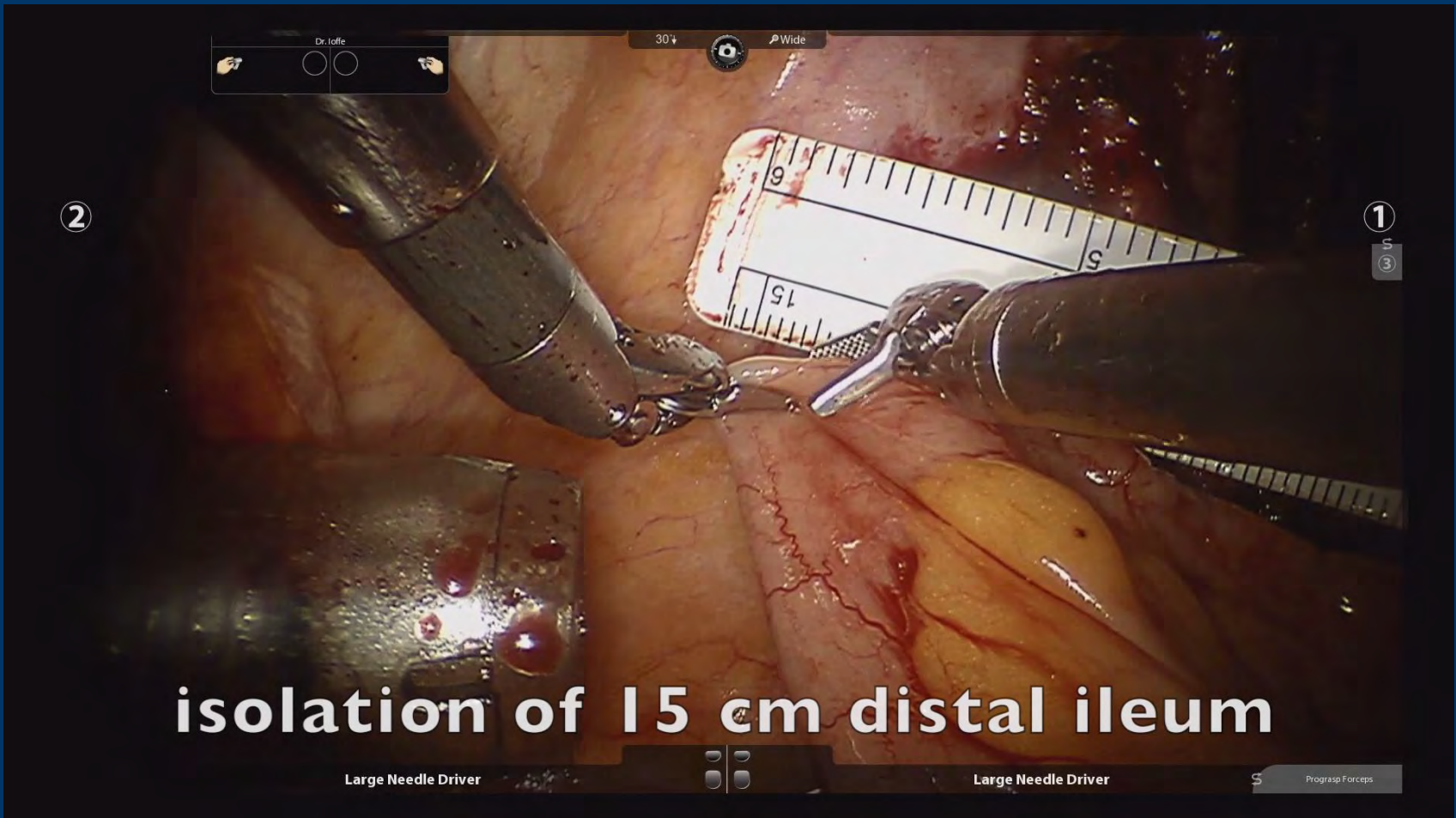








# Robotic Ileal Conduit



isolation of 15 cm distal ileum

# Technology Components

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