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PD63-12

EXTRACAPSULAR EXTENSION ON NEUROVASCULAR BUNDLES DURING ROBOT-ASSISTED RADICAL PROSTATECTOMY PRECISELY LOCALIZED BY 3D AUTOMATIC AUGMENTED-REALITY RENDERING Porpiglia F., Checcucci E., Amparore D., Piana A., Piramide F., Volpi G., De Cillis S., Manfredi M., Fiori C., Piazzolla P., Vezzetti E.





Nowadays, in uro-oncological surgical procedures, **functional** and **oncological outcomes** are equally important.

New technologies have allowed to pursue these two objectives personalizing surgical interventions







Standard 2D imaging remains the basis for preoperative planning and intraoperative decision making, but requires an important "building in mind" process.

3D reconstructions allow to overcome this limitation.



Current Use of Three-dimensional Model Technology in Urology: A Road Map for Personalised Surgical Planning

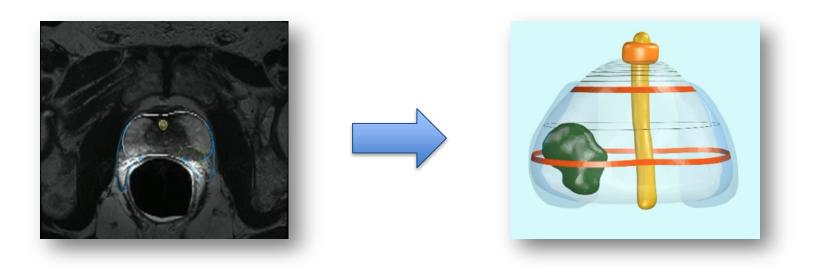
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3D virtual models

From standard 2D imaging, thanks to dedicated software, it's possible to obtain **3D virtual models**





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3D rigid virtual models

- In these models organs were reproduced in the same position of the pre-operative imaging
- These virtual **models can be overlapped** to the endoscopic view during the surgical procedure
- They can only be used during static phases of the procedure



Augmented-reality robot-assisted radical prostatectomy using hyper-accuracy threedimensional reconstruction (HA3D[™]) technology: a radiological and pathological study

Francesco Porpiglia*;, Enrico Checcucci*, Daniele Amparore*, Riccardo Autorino[†];, Alberto Piana*, Andrea Bellin*, Pietro Piazzolla*, Federica Massa[‡], Enrico Bollito[‡], Dario Gned[§], Agostino De Pascale[§] and Cristian Fiori*



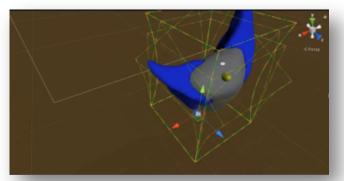
3D elastic virtual models

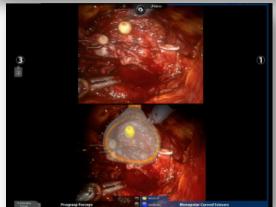
- In order to simulate tissue's deformation during surgical procedures different software and engineering approaches were proposed
- Among the different techniques available we chose non-linear parametric deformations and we applied it to our rigid 3D models

Platinum Priority – Surgery in Motion Editorial by XXX on pp. x-y of this issue

Three-dimensional Elastic Augmented-reality Robot-assisted Radical Prostatectomy Using Hyperaccuracy Three-dimensional Reconstruction Technology: A Step Further in the Identification of Capsular Involvement

Francesco Porpiglia^{a,*}, Enrico Checcucci^a, Daniele Amparore^a, Matteo Manfredi^a, Federica Massa^b, Pietro Piazzolla^a, Diego Manfrin^a, Alberto Piana^a, Daniele Tota^b, Enrico Bollito^b, Cristian Fiori^a







Limit of rigid and elastic models

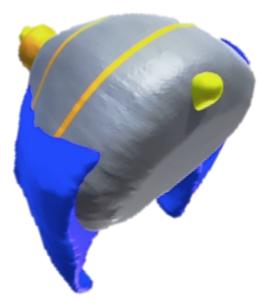
- The entire overlap process is operator dependent
- The virtual images are manually superimposed to the real organs thanks to a 3D mouse





3D virtual models & prostate surgery

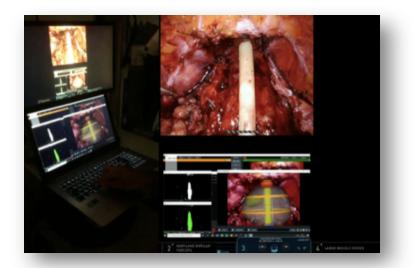
- Better identification of tumour's location
- The potential **involvement of the capsule** is clearly visible
- Intraoperative tailoring of the nerve sparing strategy





Automatic AR system

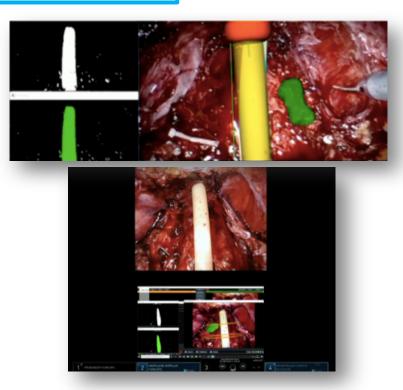
- Aim of our study: evaluate the accuracy of our new Automatic AR system in order to identify the tumour extracapsular extension at the level of preserved neurovascular bundles
- Population: 10 patients with positive target biopsy performed on an index lesion with suspicious ECE





Automatic AR system

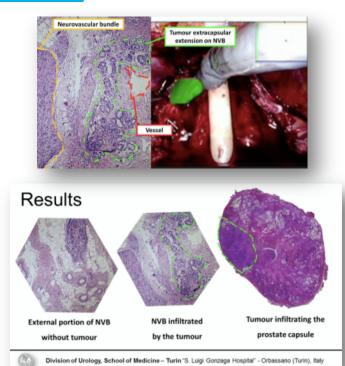
- We developed a new AR software able to automatically identify the catheter, overlapping automatically the 3D virtual model to the real anatomy
- A metallic clip was placed at the level of suspected ECE as indicated by the virtual images
- Finally, the entire NVBs with suspicious ECE were removed for pathological examination.





Results

- In 8 cases the final pathology confirmed the presence of ECE
- The presence of ECE at the level of metallic clip was recorded in 100% of the cases
- Microscopic evaluation confirmed the cancer presence in all the cases and revealed a mean length of ECE of 4 mm





Conclusions

- Our AR platform based on computer vision algorithm allows an effective Automatic AR RARP
- The 3D virtual images, automatically anchored to the catheter, are able to correctly identify the location of ECE at the level of NVBs
- This tool might be useful to tailor the procedure and the nerve sparing strategy

