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UT Southwestern patient undergoes region's first single-incision, robot-assisted kidney repair

DALLAS – Sept. 28, 2010 – A stabbing pain in Cameron Giammalva's abdomen came on so suddenly one day during his freshman year of college that he and his friends mistook it for appendicitis.

A trip to the emergency room proved his appendix was not the source. It was a congenital narrowing of the ureters – tubes that connect the kidneys to the bladder. Luckily for Mr. Giammalva, his condition could be fixed via single-incision, robot surgery by UT Southwestern Medical Center physicians, the only team in North Texas now doing the procedure.

Mr. Giammalva's road to corrective surgery took several years, and during this time he tried several home remedies to alleviate the pain.

"By the time I was diagnosed, the really bad pains were gone, but I had this dull aching sensation, especially if I drank a lot of water or coffee," Mr. Giammalva said.

The ureters act like plumbing, carrying urine from the kidneys down to the bladder. When the ureter is kinked, urine doesn't flow properly, which can cause pain and worse – irreversible kidney damage.

"It is most commonly detected in children, but I see about one patient a week who first experiences the pain as an adult," said Dr. Jeffrey Cadeddu, professor of urology and Mr. Giammalva's surgeon. "The condition is uncommon, but it can go undetected for years and years. If it goes undiagnosed for too long, the kidneys can actually stop working."

In Mr. Giammalva's case, the pain episodes were too frequent to let it go on any longer. His physician knew about Dr. Cadeddu's expertise in surgical treatment of such conditions.

"It was definitely appealing to me to have just one incision," Mr. Giammalva said. "The doctors could just go in through my belly button, basically, and I wouldn't have any scars."

Ten years ago, Dr. Cadeddu said, this particular surgery, called a pyeloplasty, was extraordinarily invasive with a lengthy recovery time. Over the years, new developments have led to the need for fewer and smaller incisions.

"In 2007, we were the first in the area to do this surgery through the belly button laparoscopically. But it was a very technically challenging surgery to do," Dr. Cadeddu said. "With the surgical robot, it's a bit easier."

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Since acquiring its first DaVinci robot in 2006, UT Southwestern has been at the forefront of robotic surgery, performing complex urologic, thoracic and bariatric procedures. Dr. Cadeddu and the team of urologic surgeons are now using the newest generation of DaVinci robot – the DaVinci SI.

The results are the same as open surgery or laparoscopic surgery, but there are no visible scars, and the recovery time is much faster, Dr. Cadeddu said.

“Patients usually spend one to two days in the hospital and are back to normal within a few weeks,” he said.

For young patients like Mr. Giammalva, those benefits were major.

“About two weeks after my surgery, I went for a run,” he said. “The episodes of pain have also disappeared.”

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