How do young residents practice laparoscopic surgical skills?
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Objectives: To investigate whether a training system using a dry box is feasible for training young urologists.
Despite laparoscopic surgery being widely indicated for several urological diseases, a laparoscopic training
system for young urologists has not been fully established yet. However, the learning curve for laparoscopic
surgery has not yet been ascertained.

Methods: We continued to test 11 sixth-year residents (postgraduate year: PGY6) and third-year residents (PGY3)
in our department in terms of surgical skills using a dry box. We gave them several tasks (cutting and suturing)
and let them practice until task completion. We continued to test all participants by these tasks for 16 weeks.

Results: At the beginning of the present study, the PGY6 residents achieved significantly better scores than the
PGY3 residents. However, the difference between the 2 groups became insignificant over time. Furthermore,
statistical analysis revealed that a practice time of 100 minutes per week was the only significant factor affecting
the last test score. For the final test, the mean practice time for all participants was 79.1 minutes per week.

Conclusions: These results suggest that laparoscopic surgical skills can definitely be polished by adequate
voluntary practice.

Editorial Comment
Although genitourinary laparoscopy has been established as surgical technique for treatment of uro-
logical diseases; training of residents and surgeons has been challenging due to the lack of validated teaching
protocols and techniques. The authors have focused on a dry lab exercises that involved mentors and residents
in an intensive training schedule demonstrating improvement in laparoscopic surgical skills despite the level
of academic training. According to the authors, the only variable significant to improvement of skills was the
practice time of 100 min/week practicing a set of laparoscopic exercises defined by the authors. Age, clinical
experience, and laparoscopic experience did not affect the outcome of the final evaluation. Certainly, clinical
experience in laparoscopy must be correlated to these findings; moreover, a validated skill development program
must be created to train our residents and surgeons.

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