The use of robot-assisted surgery combined with laparoscopy has become ever more common since the year 2000. Initially used for radical laparoscopic prostatectomies, it is now applied in many other surgical procedures, even though its efficacy compared to conventional surgery remains unproven.

A randomised study and an observational study of the resection of rectal carcinomas and radical nephrectomy, respectively, found that the robot-assisted procedures resulted in comparable clinical outcomes to those of laparoscopy. However, innovations ought to improve care standards, and ‘non-inferiority’ ought not to be the criterion.

One argument for the introduction of robot-assisted surgery could be if it yielded considerable cost-savings. Both studies, however, found markedly higher duration and costs of the procedures. Excessive use of these expensive medical devices increases costs, which conflicts with the principle of optimal use of public funds.

**Literature references**


The literature refers to the Dutch text

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