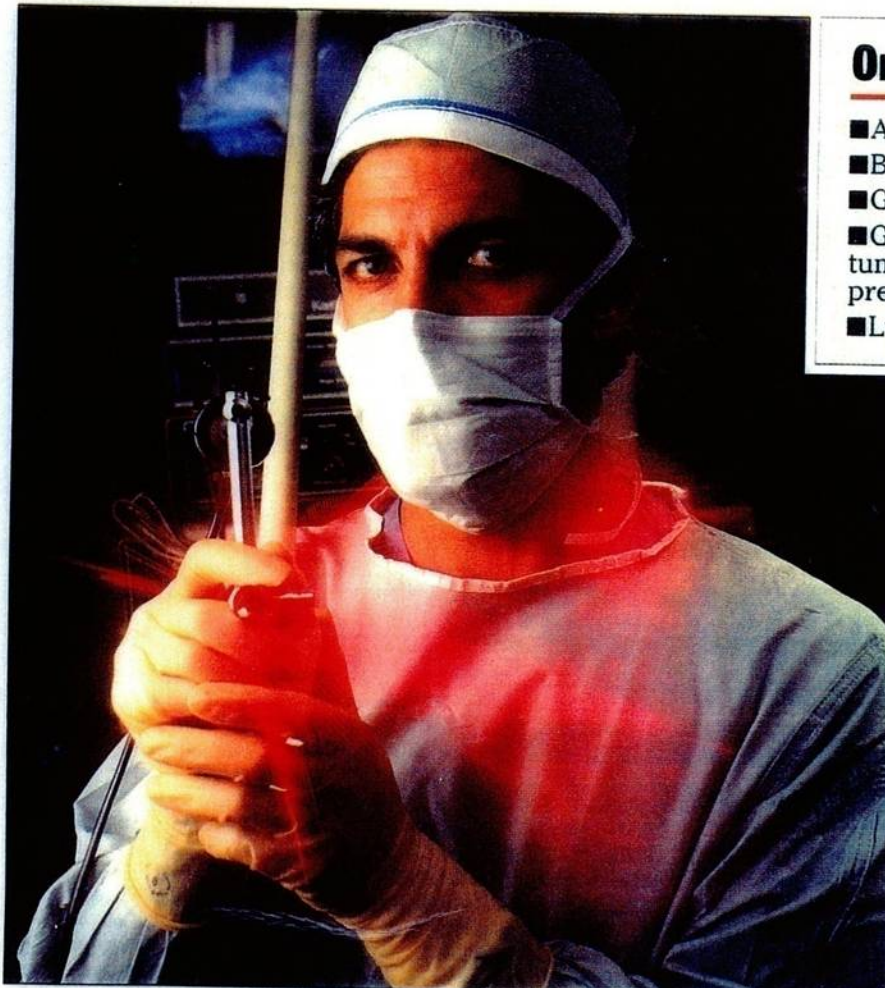


Hanging Up the Knife

A novel surgical technique promises to save patients time, money and blood



One Tool, Many Uses

- Appendicitis
- Bowel tumors and adhesions
- Gallstones
- Gynecological problems: fibroid tumors, endometriosis, ectopic pregnancies
- Lung lesions

'In 20 years, major abdominal surgery will be nearly extinct': *Nezhat*

table, but no one is wielding a knife. In place of the usual seven-inch incision, Dr. Camran Nezhat makes a small puncture in her navel and inserts a baton-size scope equipped with a tiny video camera and a laser. Then, after easing irrigation and grasping instruments through even smaller openings just above her pubic bone, he turns on the camera and sets about his work. Eyes fixed on one of four TV screens, he moves deftly through her abdominal cavity, searing through the webs of scar tissue that have once again mummified several organs and attached her bowel to her abdominal wall. Within about 90 minutes, Martha B. is out of the operating room, having lost teaspoons instead of cups of blood. She'll leave the hospital within hours instead of days, and return to work in one week instead of three. If she's lucky, she may even end up pregnant.

First report: The treatment, patients re-