

IMSUT Hospital

Department of Surgery

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The mission of the Department of Surgery is to deliver optimal surgical care for a broad spectrum of gastrointestinal diseases, including colorectal and gastric cancers. Since the participation of Professor Shida and Dr. Ahiko in September 2020, minimally invasive approaches have become the standard. Robotic surgery was introduced for rectal cancer in April 2021 and subsequently expanded to colon cancer in September 2022, reflecting our continued commitment to surgical innovation.

1. Introduction

Our department's policy is to minimize the period of anxiety following a cancer diagnosis by aiming to perform surgery and discharge patients within one month of the initial consultation for colorectal and gastric cancers. Guided by this policy, our entire staff works together with dedication and commitment to provide the highest-quality care in their daily clinical practice.

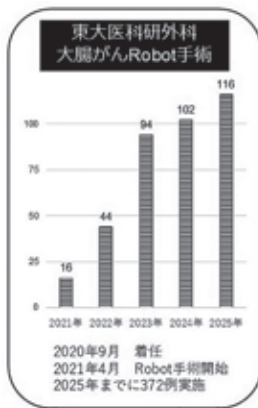
In April 2025, Dr. Imaizumi joined the department, further strengthening our clinical team. Dr. Go Ito has been a member of our department as a senior resident (specialist trainee) since April 2024, and in April 2025, Dr. Sakuyama was promoted to Senior Assistant Professor.

We specialize in the treatment of gastrointestinal cancers, with a particular focus on the surgical treatment of colorectal and gastric cancers. As certified surgeons under the Japan Society for Endoscopic Surgery's Endoscopic Surgical Skill Qualification System (Dr. Shida and Dr. Aikou), as well as qualified console surgeons for robotic surgery (da Vinci system) (Dr. Shida, Dr. Sakuyama, Dr. Monma, Dr. Mukohyama,

Dr. Imaizumi, and Dr. Ito), we actively perform minimally invasive surgeries that reduce the physical burden on our patients. Additionally, starting in October 2022, after Dr. Kojima S (Visiting Lecture in our department) joined our team, we began offering laparoscopic surgery for inguinal hernias.

2. Treatment for gastrointestinal malignancy

Our department primarily treats colorectal and gastric cancers. For colorectal cancer, with appropriate preoperative assessment and stage-tailored surgery, complete cure is achievable in over 70% of patients, even in advanced cases. For rectal cancer, we prioritize quality of life by performing autonomic nerve-sparing and, whenever oncologically feasible, anus-sparing procedures. As certified surgeons under the Japan Society for Endoscopic Surgery's Endoscopic Surgical Skill Qualification System (Dr. Shida) and as certified robotic surgery proctors (Dr. Shida), we actively perform minimally invasive surgeries. Robotic-assisted procedures have been performed for rectal cancer since April 2021 and for colon cancer since September 2022. The volume of robotic surgery



at IMSUT Hospital has increased steadily, reaching 116 cases in 2024.

For gastric malignancies, including gastric cancer and gastric GIST, we adopt a stomach-preserving strategy whenever possible, recognizing that extensive resection can impair postoperative nutrition and lead to weight loss and weakness. Guided by this principle, we focus on minimally invasive approaches with small incisions, aiming to provide patient-friendly surgeries without compromising oncological outcomes.

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3. Surgical treatment for inguinal hernia

Since October 2022, we have been performing laparoscopic surgery for inguinal hernias. Compared with traditional open surgery, the laparoscopic approach uses smaller incisions and, in particular, we employ the Total Extraperitoneal (TEP) technique, which avoids entry into the abdominal cavity. This approach reduces the risk of intra-abdominal complications such as adhesions, bowel obstruction, or organ injury, providing a safer and less invasive option for patients.

4. Surgical treatment for other benign diseases

We also treat a variety of benign diseases such as acute appendicitis, cholecystitis, and colonic diverticulitis.

5. Endoscopic examination and treatment with chemotherapy

In collaboration with the Department of Oncology and General Medicine (Prof. Boku N., Dr. Baba K., and Dr. Fujisawa G.) and the Department of Gastro-

enterology (Prof. Ikematsu H., Dr. Hirata Y. and Dr. Minamide T.), we have performed many cases of upper gastrointestinal endoscopy and colonoscopy as well as chemotherapy.

6. Launch of Robotic Surgery

Robotic surgery is a form of laparoscopic surgery performed with robotic assistance, where the surgeon controls the robot—surgery is not performed autonomously. The use of multi-jointed robotic instruments under high-definition 3D visualization allows for more delicate and precise operations, overcoming the limitations of conventional laparoscopic surgery, where rigid instruments restrict fine manipulation in deep or narrow anatomical spaces. Robotic systems enable precise tissue dissection and functional preservation by minimizing nerve and organ injury.

In April 2021, we began performing robotic surgery for rectal tumors, including rectal cancer, rectal GIST, and rectal neuroendocrine tumors (NET), following our hospital's receipt of facility certification for robotic surgery for rectal tumors. With the revision of the Japanese medical reimbursement system in 2022, robotic-assisted surgery became covered by insurance for colon cancer as well, and in September 2022, we expanded our program to include colon cancer, receiving facility certification from the Ministry of Health, Labour and Welfare.

As gastrointestinal surgeons, our mission extends beyond operative excellence to the generation of robust scientific evidence. While expanding robotic surgery, our goal is not merely to increase surgical volume, but to leverage the platform's unique advantages to develop novel surgical concepts and techniques for the global surgical community. In 2025, we introduced outermost-oriented surgery for right-sided colon cancer (Shida D. et al.; *Ann Gastroenterol Surg* 2025) and reported robotic lateral pelvic lymph node dissection for lower rectal cancer (Shida D.; *Cancers* 2026), exemplifying our commitment to innovation-driven surgical research.

7. Publications

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