

Historical Perspective

(936 - 1013) is credited with the **Abulkasim** The tenth century Arabian physician first documented use of reflected light

to view an internal body cavity . Although the procedure was successful , thermal injury from the light source limited the technique.Improvements in optics in the latter half of the nineteenth century rekindled interest in the procedure . Around the turn of the nineteenth century , in Europe , particularly in Austria and Germany , many different centers were exploring endoscopy and laparoscopy . In , an Austrian laryngologist , inspected the esophagus of a **Karl Stoerk**1869 , patient with an instrument comprised of different jointed segments that could be a German physician , **Kelling , , Georg**straightened after insertion . In 1901 coined the term “ celioscopy “ in describing his use of a cystoscope to examine , **Jacobaeus**the peritoneal cavity of a dog , utilizing insufflation with air . In 1910 , a Swedish physician , reported the first use of celioscopy in humans and in 1912 he published a 97 – patient series . The first reported use of laparoscopy in the of John Hopkins **Bertram Bernheim**United States occurred in 1911 when University performed “ organoscopy “ on two patients , one of which was a patient of W.S.Halstead , diagnosing localized pancreatic cancer , which was later . **Dr.Halstead**confirmed at open laparotomy by

and ,in fact , opened a school for **Jacobaeus** built upon the work of **Heinz Kalk** laparoscopy in Germany in the 1920s. He made a number of key advances including the introduction of the angled telescope as well as describing a multiport procedure for performing liver biopsies. The next major advance was in 1938 with the development of a needle that was inserted into **Veress**made by the abdominal cavity to induce pneumoperitoneum. It could be argued that it was , a gynecologist who introduced the automatic insufflator **Kurt Semm**the work of in the 1970s , that ushered in the modern era of laparoscopy .The ability to automatically regulate gas flow and abdominal pressure significantly reduced the incidence of bowel perforations as well as injury to other intra – abdominal and developed a thermocoagulator to help reduce **Semm**retroperitoneal structures . the injuries caused by unipolar cautery . He also developed the angled – lens scope and hook scissors to allow better visualization and manipulation of pelvic development of the “open “ technique of cannula **Hasson’s** structures. With insertion in the late 1970s , laparoscopy became a safe and effective procedure

had performed over **Semm** with innumerable applications . In fact , by 1984 , 14,000 laparoscopic procedures with an overall complication rate of 0.28% . Despite these advances , it was not until the introduction of the laparoscopic in **Mouret** cholecystectomy , which was first performed in 1988 independently by in the United States that laparoscopic surgery **Saye** and **McKernan** France and gained widespread acceptance .