



LAPAROSCOPIC ASSISTED VAGINAL HYSTERECTOMY

Laparoscopic Assisted Vaginal Hysterectomy is an operation that is performed by passing several instruments through small incision sites in the abdomen in order to operate on the uterus, tubes, and ovaries. One of the main purposes of this technique is to enable your doctor to complete your hysterectomy without resorting to a large incision on the abdomen that would necessitate a long hospital stay and recovery period.

However, because of the variability of the findings at surgery, it is not possible to guarantee that a larger laparotomy incision would not be needed. Therefore, it is important to keep in mind that you may need a larger incision if the findings at surgery require it.

HOW THE OPERATION IS DONE

First, you are given an anesthetic (medicine to reduce pain). You may receive one of two types of anesthetics: (1) a general anesthetic, which means you are put to sleep and then awakened after the procedure is over, or (2) a regional anesthetic, which is medicine injected into your back to numb the abdomen during the procedure. With regional anesthetic you are awake. The more common type of anesthetic for this procedure is the general anesthetic.

Next, the doctor will put some gas into your abdomen through a small needle. The abdomen is the hollow area inside your belly. Your uterus, tubes, and ovaries lie inside the abdomen. The gas is placed into the abdomen so the doctor can see the pelvic anatomy better, and so that room is made for the instruments that are used during the procedure.

The doctor then makes a small cut near your navel, as well as two or three additional small incisions at the sides or near the base of the abdomen near the bladder. These cuts are usually so small they can be covered with a small bandage about the size of a standard band-aid. Through these incisions the laparoscope and other instruments can be passed to visualize and operate upon the organs in the abdomen. The operation usually takes several hours to perform.

There is usually only mild to moderate pain following the procedure. After the operation, you will probably feel some pain or soreness at the spots where the small cuts were made. You may also feel pain in your neck or

shoulders, related to the gas that was placed in your abdomen. If you are put to sleep, you may feel some soreness in your throat if a tube was placed in your windpipe to help you breathe during the operation. These pains usually go away in a few days. Pain medication will be provided before you leave the hospital, for the mild discomfort you may have following the procedure.

RISKS AND COMPLICATIONS OF LAPAROSCOPIC ASSISTED VAGINAL HYSTERECTOMY SURGERY

Laparoscopic Assisted Vaginal Hysterectomy surgery is generally considered to be a safe operation. However, it is associated with certain hazards and risks, as in any other surgery. Serious complications do not often occur (1 to 4 in 1,000 operations). Most of the time, the serious problems can be treated and taken care of by the doctor. If a serious problem does occur, it may mean that during the operation, the doctor may need to open your abdomen and do a more major procedure (a bigger operation) than was originally planned. Your doctor can make no guarantee as to the result that might be obtained from this procedure.

Some of the possible complications of laparoscopic assisted vaginal hysterectomy surgery are:

- Bleeding from cuts made in your skin,
- Bleeding inside your abdomen,
- Skin burns (if electrical current is used),
- Infection of skin incisions and inside the abdomen; hernias in the surgical wound,
- Allergic and other bad reactions to one or more of the substances used in the procedure,
- Injury to your bladder or urinary system - this is rare,
- Injury to blood vessels or nerves in the abdomen, blood clots in the pelvis and lungs - these is also rare,
- Injury to your intestines - this is rare.

When intestinal injury occurs, it is usually because the electrical current touches a spot on the intestine and burns it. The intestine could also be injured by the laparoscopic instruments. Sometimes the doctor can tell immediately if the part of the intestine is burned or injured. If so, he/she will immediately make a larger cut into the abdomen so that the burn or tear in the intestines or other tissues can be repaired. Sometimes the doctor cannot tell right away if a part of your intestines or other organs are injured. Infection, including a serious infection called peritonitis, can result up to 2 weeks after the operation. You should return to your doctor at once if you get a fever or severe pain in your abdomen after the procedure.

- The doctor cannot finish the operation. This could be caused by a number of problems. For instance, you might have a lot of scars inside your abdomen, or the doctor may not be able to pass the laparoscope into the abdomen due to technical reasons.
- Anesthetic problems. Various drugs used to reduce pain can rarely cause a bad reaction, particularly if the patient is sensitive to the drug. Serious problems are:
 - Your heart may stop beating. This is very rare.
 - Death. This is very rare.

Some of the complications of this procedure may require major surgery; some of the complications can cause poor healing wounds, scarring and permanent disability; very rarely, some of the complications can even be fatal.

FRANK W. LING, MD

Dr. Ling is Clinical Professor, Department of Obstetrics and Gynecology at Vanderbilt University, Nashville, Tennessee.

Date Published: 2000-09-21

Health Information Provided by Women's Health Specialists

7800 Wolf Trail Cove, Germantown, TN 38138, (901) 682-9222, www.whsobgyn.com

This information is for educational purposes only. It does not represent comprehensive coverage of the topics addressed and is not a substitute for direct consultation with your health care provider. Always consult a health care provider regarding your specific condition. Trademarks referred to are the property of their respective owners.