

Story View

Gentler hysterectomy shortens recovery

By Peggy Peck

United Press international (UPI) Science News

NEW ORLEANS, April 29 (UPI) -- A new hysterectomy procedure that “spares” ligaments and nerves is quicker and results in less blood loss and shorter hospital stays, a surgical researcher reported this week.

The procedure uses a standard abdominal incision -- called a bikini cut because the 2 to 3 inch long incision is positioned low enough to be covered by a bikini bottom. Once inside the abdomen, however, “we don’t follow traditional techniques,” said Dr. Dary Samimi, medical director and the U.S. Women Institute, Fountain Valley, Calif. “We don’t cut the internal support system.”

In an interview with United Press international Samimi said the new technique, which he developed, reduces the average amount of blood loss during surgery by roughly 30 percent and cuts hospital stay by about a day.

Samimi presented his results at the 51st Annual Clinical Meeting of the American College of Obstetricians and Gynecologists Mon day.

He said he has performed the new surgical technique, which he calls intrastromal abdominal hysterectomy, on 43 women but he only presented results from a series of 20 women. Their outcomes were compared to results from 20 women who underwent traditional abdominal hysterectomies.

In the surgery, he carefully works around the thick ligaments that support the uterus and instead cuts through the stroma, a layer of fiber and smooth muscle that surrounds the uterus.

In addition to less blood loss, Samimi claims that his procedure causes fewer complications than traditional hysterectomies, which are sometimes associated with urinary incontinence and sexual dysfunction. Moreover, he said that the procedure can be done on “all women, regardless of the size of the uterus.”

Currently women with smaller wombs are usually offered the option of vaginal hysterectomy, which doesn’t require abdominal incision and which has a shorter recovery time. But Samimi said that the vaginal procedures are associated with nerve damage and “they do require the cutting of ligaments.” He said his ligament-sparing technique shortens post-operative discomfort. “I no longer do vaginal hysterectomy, instead I do this procedure because it is better for the patient,” he said.

Others are less convinced. Dr. Bryan Cowan, professor and chairman of obstetrics and gynecology, University of Mississippi, Jackson, Mississippi told United Press International (UPI) that “twenty patients are just not enough to make this claim. You need at least 60 patients in each arm to really show a difference.” Cowan said, too, that a good study would “call in other centers, maybe three centers in all, to broaden the results.”

He noted, for example, that length of stay and quick return to work may reflect “a determined physician and a working woman who really needs to get back to that job.”

He said, too, that while it seems technically possible to remove the uterus in the way described by Samimi, “most surgeons prefer to cut the ligaments so that we have a good open field for surgery.”

Byline Type: author

Slugline: bc-us-femalehealth-hysterectomy

Dateline Date: 2003-04-29 00:00:00.0

Publish Date and Time: 2003-04-29 17:04:00.0

Desk: Science & Technology

Genre:Current

IPTC Codes: Health treatment, Medical research, western Reproduction

Status: Published

Checked Out: No

Urgency: 5

City/State/Country: New Orleans, LA, United States

Abstract:

Geographical Relevance: NONE

Reuters Health Information (2003-04-29): Intraabdominal hysterectomy Clinical

Intraabdominal hysterectomy shortens hospital stay, reduces blood loss Last Updated: 2003-04-29 11:24:33-0400 (Reuters Health)

By Alison McCook

NEW ORLEANS (Reuters Health) - intraabdominal hysterectomy appears to reduce hospital stay and blood loss associated with traditional hysterectomies, researchers said here Monday during the 51st annual clinical meeting of the American College of Obstetricians and Gynecologists.

During the procedure, the pelvic support ligaments attached to the uterus are left intact and a portion of the cervical stroma left in place.

In a 40-patient comparison with traditional hysterectomy, those who underwent intrastromal abdominal hysterectomy had less blood loss during the operation; the change in hemoglobin was 1.1 g/dL versus 1.4 g/dL in the traditionally treated group (p=0.001).

Furthermore, the new surgery was associated with a shorter average hospital stay of 2.7 days relative to the average of 3.15 days among the women given traditional hysterectomies (p=0.005).

“With this technique, hospital stay is minimal, because the complication rate is minimal,” lead author Dr. Dary Samimi of Fountain Valley Regional Hospital and Medical Center in California told Reuters Health.

In an interview, Dr. Samimi noted that intrastromal hysterectomy is nerve-sparing, and may also reduce the risk of ureter injury during surgery and later sexual dysfunction or prolapse.

“This is the only way you can preserve the support system” for the pelvis, he said, “Because the cardinal ligament and uterosacral ligament are a major support system in the pelvis.”

Surgery typically lasts between 60 and 90 minutes, Dr. Samimi said and involves a simple bikini cut. However, he noted, “This technique needs a little training.”

The researcher added that he does not recommend the patients undergoing hysterectomy for treatment of cancer receive this procedure, given that a small portion of tissue is left behind.

Copyright ©2003 Reuters Limited. All rights reserved, Republication or redistribution of Reuters content, including by framing or similar means, is expressly prohibited without the prior written consent of Reuters shall not be liable for any errors or delays in the content, or for any actions taken in reliance thereon, Reuters and the Reuters sphere logo are registered trademarks and trademarks of the Reuters group of companies around the world.

5/2/03