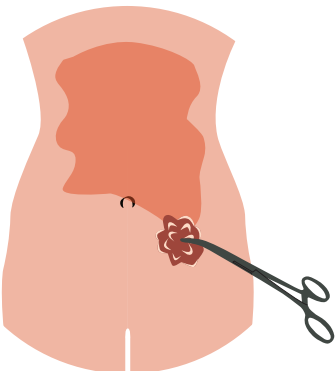


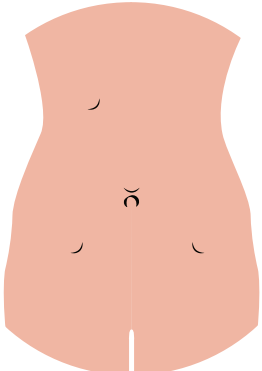
A **Total Laparoscopic Hysterectomy** (TLH) is a surgical procedure during which the uterus and cervix (and potentially other gynaecologic structures) are removed. The entire surgery is **laparoscopic**.

Laparoscopic procedures involve making small incisions (typically less than 1 cm) on the abdomen. These small incisions are used to insert surgical instruments into the abdominal and pelvic cavity to perform the surgery. One of the instruments is a camera, which allows the surgeon to visualize the operating field.

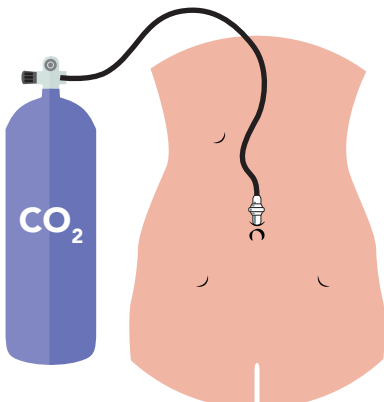
How is a Total Laparoscopic Hysterectomy performed?

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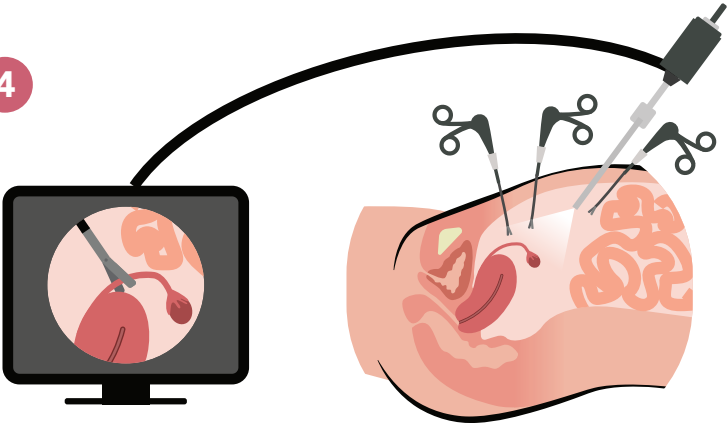
1

After you have received anesthesia, your abdomen is cleaned and the surgical field is prepared.
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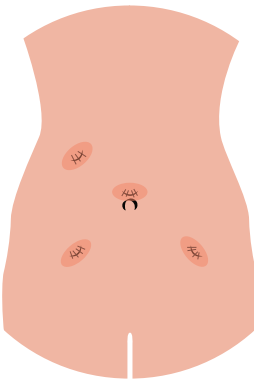
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Small incisions are made on the abdomen.
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3

Carbon dioxide is introduced into the abdomen in order to create the physical space necessary to perform the procedure without having to make a large cut across the abdomen.
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4

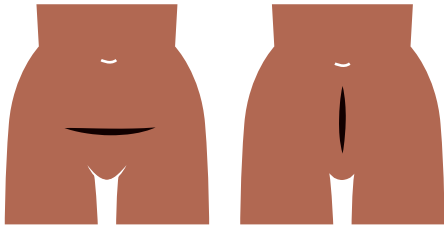
Surgical instruments are inserted into the small incision sites. Your uterus and cervix (± ovaries and fallopian tubes depending on your particular procedure) will be taken out through one of the incisions your surgeon uses during the operation, or through the vagina.
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5

The surgical instruments are removed, your abdomen is deflated, and stitches are used to close the small incisions in your abdomen.

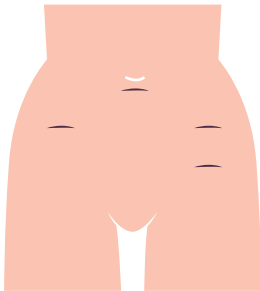
Laparoscopic Hysterectomy vs. Other Routes

Prior to the advent of laparoscopic techniques and instruments, hysterectomies were completed through “**open**” or “**vaginal**” approaches to uterus removal. These are still completed in some cases.



Open Hysterectomy

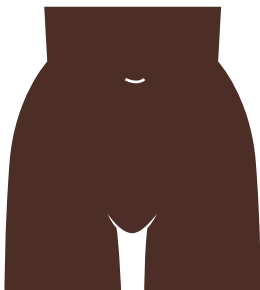
An **open hysterectomy** involves making a large incision on the abdomen (incisions can be up-and-down or side-to-side in orientation), opening up the abdominal cavity so the surgeon can visualize and complete the surgery.



Laparoscopic Hysterectomy & Laparoscopic Assisted Vaginal Hysterectomy (LAVH)

With either a **laparoscopic hysterectomy** or **laparoscopic assisted vaginal hysterectomy (LAVH)**, only small incisions are required, therefore the abdomen is only open at these small sites. Using a laparoscopic approach to completing a hysterectomy is preferable over an open procedure for several reasons including:

- Less opportunity for infectious agents to enter the body
- Decreases damage and scarring to surrounding tissues
- Less pain after surgery
- Recovery is easier and faster



Vaginal Hysterectomy

A **vaginal hysterectomy** is ideal because there are no incisions in the abdomen. However, not every patient is a candidate for vaginal hysterectomy. This type of hysterectomy is typically performed for patients with pelvic organ prolapse and/or for people with a smaller uterus.

Indications for a Total Laparoscopic Hysterectomy

Indications

- Heavy Bleeding
- Fibroids
- Endometriosis
- Adenomyosis
- Some precancerous or cancerous (malignant) conditions where surgery can be completed laparoscopically

Depending on the reason for your operation, your surgeon may advise you to have your ovaries and fallopian tubes removed as well.

Nonetheless, removing your uterus and cervix means that you will no longer menstruate or be able to carry a pregnancy. After the cervix is removed, you will no longer require pap smears. However, vaginal vault smears may be suggested for some patients.

Risks of Total Laparoscopic Hysterectomy

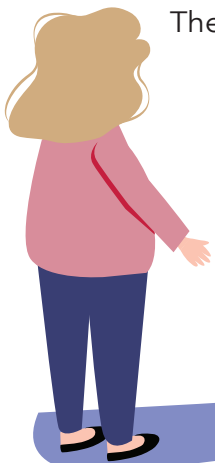
Surgical procedures always involve risks. One risk of any laparoscopic procedure is the possibility that the surgeon will be unable to perform the procedure laparoscopically, as planned, and will have to make a larger abdominal incision ("open") to complete the operation safely.



Additional surgical risks include:

- Infection
- Bleeding (during surgery and after surgery)
- Injury to surrounding tissue such as (bowel, bladder, vessels, ureters, nerves)
- Blood clots in the legs or lungs
- Risks of General Anesthesia
- Herniation in and around the incision sites
- Stitches closing the inner vagina where it was connected to the cervix may open

Alternatives to Total Laparoscopic Hysterectomy



The alternatives to a TLH depend on the **reason you are having surgery**, but can include:

- Expectant management (not having any treatment)
- Medication for symptoms such as bleeding
- Procedure to decrease blood supply to the uterus (embolization)
- Surgery to burn the lining of the uterus (hysteroscopic ablation)
- Removing the uterus through the vagina, which may or may not be possible
- Removing the uterus through an open incision