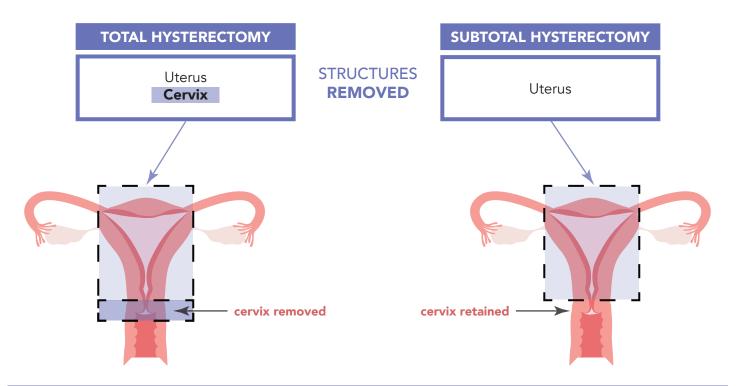
Total versus Subtotal Hysterectomy



You may have heard of different types of hysterectomies, such as a 'total' hysterectomy or 'partial' (supracervical or subtotal) hysterectomy. The difference between these two procedures is whether the cervix is removed at the time of surgery. Your doctor will discuss whether removing fallopian tubes and ovaries is right for you. This is separate from the decision to remove the cervix at the time of surgery.

'Total' or 'subtotal' hysterectomy refers only to whether or not the cervix is removed with the uterus



If your cervix is not removed at the time of hysterectomy it is important to consider the following:

- You will need to continue to undergo regular Pap testing for cervical cancer screening. If you have had abnormal Pap testing in the past, this may be an additional consideration as you plan your surgery.
- You may continue to have monthly bleeding from the vagina even after the uterus has been removed. This is because the endocervical canal may still shed its lining each month like a period until menopause.

In comparing surgical factors such as length of procedure and risks such as bleeding, supracervical hysterectomy is not superior to total hysterectomy.

There is also no evidence to suggest that performing a supracervical hysterectomy is advantageous with respect to postoperative urinary concerns (e.g. urgency, frequency, incontinence) or sexual function.

When it comes to hysterectomies performed for non-cancer reasons, supracervical (subtotal or 'partial') hysterectomy is not a superior surgery as it pertains to surgical risk (e.g. bleeding) or postoperative urinary or sexual side effects.

1. Kives S, Lefebvre G. No. 238-Supracervical hysterectomy. J Obstet Gynaecol Can. 2018 Jul; 40(7):e597-e604.