

UNNECESSARY BILATERAL SALPINGO-OOPHORECTOMY (BSO) AT THE TIME OF HYSTERECTOMY AND POTENTIAL FOR OVARIAN PRESERVATION

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OVARIAN PRESERVATION BENEFITS:

- CARDIOVASCULAR HEALTH
- BONE HEALTH
- ALL-CAUSE MORTALITY

? **WHAT IS THE RATE OF UNNECESSARY BSO AT HYSTERECTOMY AND WHAT ARE THE PREDICTORS?**

- CRITERIA FOR UNNECESSARY BSO:**
- AGE < 51 YEARS
 - PREOPERATIVE DIAGNOSIS OF CERVICAL DYSPLASIA OR BENIGN DIAGNOSIS OTHER THAN ENDOMETRIOSIS, PMDD, RISK REDUCTION & GENDER DYSPHORIA
 - ABSENCE OF INTRAOPERATIVE ENDOMETRIOSIS & ADHESIONS

COHORT

2656 HYSTERECTOMIES BY 75 SURGEONS

47 GENERALISTS
28 FELLOWSHIP-TRAINED

FROM: JULY 2016 - JUNE 2018 AT

x3 TERTIARY CARE HOSPITALS & x3 COMMUNITY HOSPITALS

2,656 HYSTERECTOMIES

CONCURRENT BSO IN **28%** (n = 749)

INDICATED BASED ON PREOPERATIVE DX
68% CASES (n=509)

UNINDICATED BASED ON PREOPERATIVE DX
32% CASES (n=240)

OVARIAN PRESERVATION POSSIBLE FOR 8%
59 OF 749 WOMEN (Met all 3 criteria)

PREDICTORS OF INDICATED BSO BASED ON PREOP DX

- ACADEMIC CENTRES: 70% vs 63%
- FELLOWSHIP-TRAINED SURGEONS: 75% vs 63%