

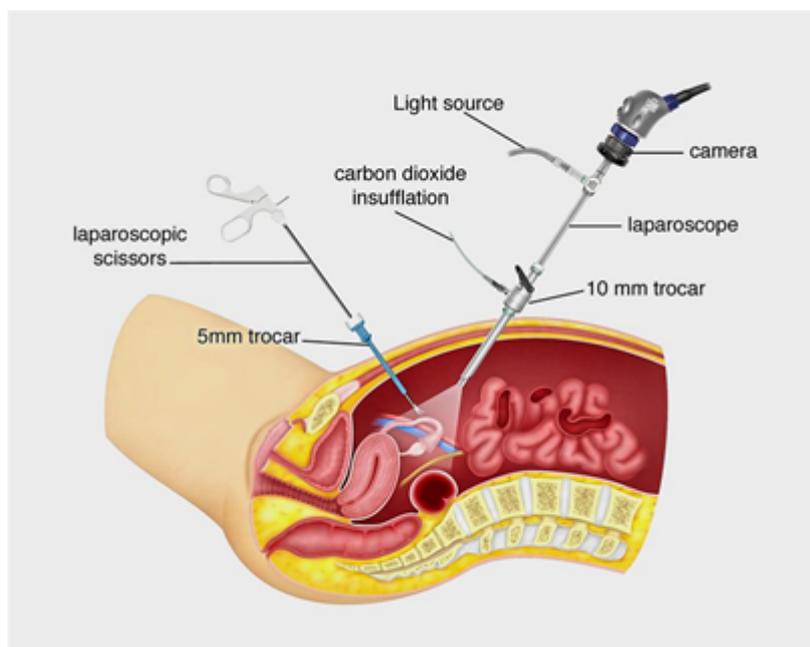
Laparoscopy

What is a laparoscopy?

A laparoscopy is a type of keyhole surgery. It is an investigation or operation to look inside your abdomen (tummy). You will be given a general anaesthetic and when you are asleep, a small telescope with a camera at the end of it will be passed through a small cut (5-10 mm) in the abdominal wall usually through the umbilicus (belly button).

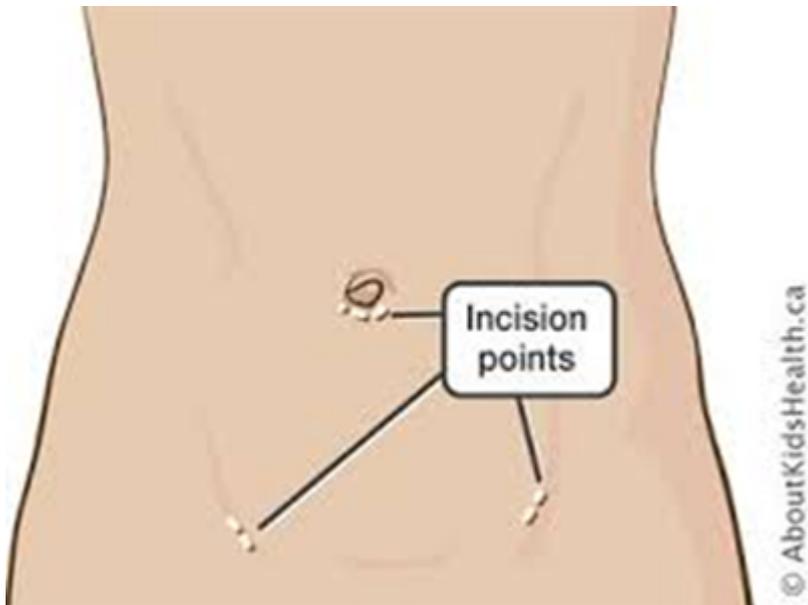
Why is a laparoscopy performed?

A laparoscopy is a diagnostic procedure which allows the surgeon to get a good view of your womb, tubes, ovaries and other parts of the pelvic region including the surface of the bladder and bowel. Treatment to scar tissue (adhesions), endometriosis, and removal of ovarian cysts, ovaries and even hysterectomy can be performed through the keyhole (Laparoscopic surgery), in the appropriate patient.



Often 1-3 small incisions are made lower down so that operating instruments can be used to gently move things around to obtain a better view and to perform the necessary operation.

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Some Indications for Gynae Laparoscopy:

- Ovarian cysts (some)
- Endometriotic chocolate cysts
- Dermoid cysts
- Release of adhesions (adhesiolysis)
- Ovarian Drilling for PCOS
- Investigation and treatment of infertility
- Chronic Pelvic Pain
- Chronic Pelvic Inflammatory Disease (PID)
- Female Sterilisation
- Tubal disease
- Oophorectomy (removal of ovaries)
- Salpingectomy removal of fallopian tubes)
- Hysterectomy

Are there any risks with the procedure?

Laparoscopy is a safe procedure, but like any other operation, comes with some small risks. There may be a risk of needing an open operation (laparotomy) in the event of a complication such as bleeding, damage to nearby organs, for example bladder or bowel or ureter injury. There is a small risk of wound infection, bleeding needing blood transfusion or thrombosis.

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All precautions are taken to perform the operation as safely as possible. Complications occur in less than one in thousand cases, unless there are other risk factors, such as previous abdominal surgery. After the operation, most women recover usually within a couple of weeks. If, however, you start feeling unwell or have concerns, you must contact the hospital where you were operated, so that you can receive the correct medical advice.

Do I need to use Contraception?

You must not be pregnant at the time of the procedure. You must use effective contraception or abstain from sex in the menstrual cycle of the procedure. Even though you will have a urine pregnancy test before your procedure, this does not always pick up very early pregnancies and if there is any doubt, your procedure will be cancelled on the day and rescheduled.

How long will I stay in hospital?

You will be discharged home either the evening of your operation or the following morning – dependent on how you feel. If you have major keyhole surgery, you may stay in the hospital for a bit longer.

Do I need to fast before the operation?

Yes, if you are having a general anaesthetic, no food, not even chewing gum should be consumed for at least 6 hours before your procedure. You can drink water up to 2 hours before your procedure. The hospital will advise you as to the timing of your procedure and guide you.

Do I need to stop my medications before my procedure?

You normally should not stop any of your essential medications. Please take your usual essential medications with a tiny sip of water at the regular time, unless advised not to by the nurse or doctor. Do remember to bring a list of all your medications to show the nurse at your pre-assessment (if you are having one) and let your admitting nurse and anaesthetist know all the medications you are on. This is because your medications may influence your anaesthetic and surgery. You should also inform the nurse and anaesthetist of any allergies that you have to foods, metals, drugs etc. Some important notes on certain conditions are listed below.

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DIABETES (insulin or tablet)

In general, you should not take your insulin injection or your tablet, when you are fasting. For example, if your operation is in the morning, DO NOT TAKE your morning dose or injection as you will be fasting overnight, but do take the previous dose as normal. If your operation is in the evening, take your doses as normal in the morning, but stop injection/tablets if you are taking any at lunchtime (you will fast for 6 hours). You can resume your normal regime, once you are eating and drinking normally. If in any doubt, consult your surgeon or anaesthetist.

ASPIRIN, WARFARIN, CLOPIDOGREL, CLEXANE or any blood thinning agent

You will need to stop most blood thinning agents such as Aspirin or Clopidogrel at least 1-2 weeks before your procedure. This is to avoid excessive bleeding at your operation. If you are on Warfarin or Clexane or any of the above blood thinners, you will need to liaise with your surgeon and if needed, your cardiologist. If in any doubt, consult your surgeon or anaesthetist and certainly inform them when you see them, as it may influence your management.

Will I have stitches?

You will usually have glue to seal the skin wounds or you may have a couple of dissolvable stitches, one in your umbilicus (belly button) and one or two just below, either to the right or left of your abdomen. These will dissolve in approximately 10-14 days. You will not usually need a dressing, once you take off the ones covering the wounds when you leave the hospital.

What can I expect after a Laparoscopy?

Nausea - You may feel slightly nauseated or groggy just as you are coming out of your anaesthetic. This will pass soon and if needed, medication will be given to you to make you feel better. You will be able to resume normal activities soon.

Vaginal bleeding - Some amount of vaginal bleeding and discharge is to be expected, usually for a week or so. If this is heavy, or has an offensive smell or causes you concern, seek medical advice. There may be blue staining if a dye has been used to test your fallopian tubes (fertility test). It is usual to have some slight bleeding after a laparoscopy, as instruments are used in the vagina to move the womb. and you may need to wear a sanitary

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towel for a few days. Avoid tampons and sex, usually for 2 weeks after the procedure, to reduce risk of infection.

Abdominal distension, wind and shoulder-tip pain - Abdominal distension is not uncommon after a laparoscopy, accompanied by shoulder-tip pain. This is due to gas that has been inserted into the abdomen (tummy) so that the abdomen will distend (rise), thereby allowing easier viewing of the pelvic organs. This bloated feeling, wind and shoulder-tip pain is temporary and will resolve itself in approximately 24-48 hours, as the gas gets re-absorbed into your system. Early mobilisation will help to increase the re-absorption process. The pain is relieved by taking your usual painkillers or medication prescribed by the hospital. Some women may need stronger pain killers.

Wound pain - For a few days after your operation, you will have a feeling of soreness on the abdomen. This is normal and should not cause concern. Pain killers such as Paracetamol or Ibuprofen are usually effective in controlling discomfort.

Other issues:

Bathing: You can have a shower or a bath when you feel able. Dry the stitches carefully. Do not use talcum powder in this area. Take off the dressings and leave to air. There is no need to cover the wounds generally.

Work: You should be able to return to work after approximately a week or two - taking into consideration the type of work you do. However, if you had major keyhole surgery, you will be advised by your doctor how long you need to be off work.

Mobilise as normal, but do not do any heavy lifting until you feel fully recovered. You must wear your stockings properly (the nurses will advise you) while you are in hospital and until you have recovered from your operation and are fully mobile.

Sex: You will be able to resume sexual intercourse when you feel comfortable. If you are bleeding, wait for this to stop. If you are not bleeding, go ahead when you feel comfortable. It is usual to take a couple of weeks but after major keyhole surgery, you may wish to wait longer.

Other physical activities: You will be able to resume other activities such as sport and swimming as soon as you feel able, usually in a week or two.

Driving: is to be avoided for 24 hours after a general anaesthetic but you will usually need

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longer until you feel comfortable to drive and make an emergency stop (1-3 weeks). Check with your car insurance company if in any doubt.

When will I know the results of the laparoscopy?

Following your laparoscopy, the findings and their implications will be discussed with you. Plans will be made for any further treatment and any necessary appointments will usually be made before you leave the hospital. The results of any biopsy taken take about a week or two to come back. You will usually be seen in clinic for a follow up or have the results communicated to you. If you need further surgery or other treatment, this will be discussed in detail with you, usually in the clinic. Your GP will be sent a letter with the findings from your procedure, and any results. You will be copied into this.

Dr. Nitu Bajekal December 2019