

Better Hysterectomy

What every woman should know before undergoing a hysterectomy

By Lori Warren, M.D.

Over the last decade major advances in laparoscopic surgery have allowed gynecologists to do less invasive hysterectomies. We are living in an exciting time for laparoscopic surgery and less patients require a large abdominal procedure than ever before!

Most people are surprised to learn that hysterectomy is one of the most common surgeries performed in the United States. It is second only to cesarean section. There are approximately 600,000 hysterectomy procedures done every year! By the age of 60, one in three women will have undergone a hysterectomy.

Traditionally, hysterectomies have been performed by either an abdominal or vaginal incision. Most gynecologists agree that if a vaginal hysterectomy can be accomplished this gives the patient a less invasive surgery with less time in the hospital and a quicker recovery.

Unfortunately, many women are not candidates for a vaginal hysterectomy. Various reasons include: large fibroid tumors, endometriosis, obesity, scar tissue caused by past surgeries, or limited vaginal access if they haven't had vaginal births. Often times in these situations a large abdominal incision is made in order to do the hysterectomy. Now, with technical advances in surgery, a large percentage of these

patients may be able to have a less invasive laparoscopic hysterectomy.

My concern surrounding the hysterectomy procedure is that 70% are still performed by a large open incision. Across many surgical specialties major advances are being made in order to offer less invasive approaches for the removal of the gallbladder, prostate, kidney and appendix. We are finding that a lumpectomy is often appropriate to treat breast cancer in some women as opposed to having a mastectomy. Many orthopedic procedures are done with a scope and smaller incisions. Now we need to look at the options for

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hysterectomies and be sure that when this procedure is required that it is done in the least invasive way possible. It is exciting that gynecologists can now embrace less invasive techniques for hysterectomies.

The different types of hysterectomies include (all can be done with or without the removal of the ovaries):

- Vaginal hysterectomy
- Laparoscopic assisted vaginal hysterectomy
- Laparoscopic supracervical hysterectomy
- Total laparoscopic hysterectomy
- Total abdominal hysterectomy

A Supracervical Hysterectomy

A supracervical hysterectomy is a good choice for patients with a history of normal pap smears. This is a laparoscopic procedure in which only the uterus is removed with small incisions. The cervix is left in place and it is important that women continue to have annual pap smears with a supracervical hysterectomy. Many women are choosing this surgery because of the short recovery period. The majority of my patients tend to resume normal activities within one to two weeks!

To me this is the most rewarding aspect of minimally invasive surgery. Patients do amazingly well! The benefits include: shorter hospital stay,

less pain, and a quicker return to a normal lifestyle. One can imagine the financial implications if time away from the work place is cut down significantly. Additionally, laparoscopic surgery provides less potential for scar formation and there is less risk of infection and consequently less hospital readmissions during the postoperative period.

With every surgery there are advantages and disadvantages. And it is important to remember that all types of surgeries have risks which include: bleeding, infection, and risk of damage to other structures. These risks are present with all types of hysterectomies.

Why aren't more minimally invasive hysterectomies being offered to the 600,000 women having hysterectomies every year? This is a complex question with many factors attributing to the answer. I strongly believe that the biggest changes in surgical trends for women will occur when the female patient is educated about the different options and will start to ask and even demand that she be considered for one of the less invasive hysterectomy options.

Who do we want our loved ones to see? The surgeon who performs an open abdominal hysterectomy on his/her patients 70% of the time, or the one who rarely takes the

open abdominal approach?

There are many gynecologists who can offer a less invasive type of hysterectomy and it is important that women find those doctors. Patients shouldn't feel guilty about seeking a second opinion if their doctor is recommending an open abdominal hysterectomy. There is a reasonable chance that their surgery can still be done with one of the less invasive options.

I truly believe that is where we will begin to see the changes that desperately need to happen to keep women's surgical care on the cutting edge. Women need to work together to inform each other and ultimately demand that they have access to the least invasive surgery whenever possible.

Lori Warren, M.D. is an advanced gynecologic laparoscopic surgeon. She graduated from the University of Kentucky Medical School. She came to Louisville after completing her Residency in Obstetrics and Gynecology at Tufts University in Boston. She has been in practice with Women First of Louisville for 17 years and has specialized in minimally invasive surgery in recent years. She was recently interviewed on the CBS Evening News with Katie Couric. Her hysterectomy segment detailed the persistently high rates of abdominal hysterectomies being done each year. She was also interviewed on the Early Show including a Follow up Q and A with Dr. Jon Lapook, medical correspondent with Katie Couric. She is passionate about the education of patients and has made it her mission to improve the quality of surgical care provided to women. For more information visit her web site at www.betterhysterectomy.com.



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The Hubbard Clinic has evolved into a "Quality of Life" practice that specializes in a variety of Urological and Gynecological conditions and treatments. The Prostate Center is dedicated to the treatment of men over the age of 40 for symptoms related to prostate disease due to benign prostatic hyperplasia (BPH), sexual dysfunction, and bladder control. The Women's Care Center specializes in the treatment of adult females with urological conditions, such as: urinary leakage, urinary voiding problems, frequent urination, interstitial cystitis, sexual dysfunction, and pelvic organ prolapse. The Women's Life Cycle Center is committed to providing preventative gynecological screenings to women of all ages. Also, the center offers various treatment options for gynecological conditions, such as: osteoporosis, abnormal uterine bleeding, abnormal pap smears, contraception, and unexplained pelvic pain.

The Procedure Center at The Hubbard Clinic specializes in providing office procedures. The biggest advantage of the newly renovated center is the expertise of Certified Nurse Anesthetist to provide conscious sedation. For men, minimally invasive procedures are offered for treatment of BPH, including: TUNA and TUM-T. For women, a variety of procedures are now being offered, including: TVT Sling for incontinence, Essure permanent sterilization, uterine ablations for abnormal bleeding, and cystourethroscopy with biopsy and fulguration for diagnosis and treatment of interstitial cystitis.

"We would like you to take one less pill, walk one extra block, lose one more pound, and ultimately, Live Life Without Limits."

- John G. Hubbard, MD