

**Center for Minimal Access
Surgery in Gynaecology**

**Department of
Gynaecology and Obstetrics**

**Hospital Sachsenhausen
Frankfurt
Academic Teaching Hospital
University of Frankfurt**



Tips & Tricks Part II Myomectomy

**Philipp-Andreas Hessler
Head of Department**

**Hysterectomy Masterclass
ESI Hamburg 17th to 18th April 2013**



Part I Hysterectomy
the big and the difficult uterus

Part II Myomectomy
no limits ?

Part III Ectopic fibroids
Problems due to morcellation



Cases of endoscopic surgery overall **23000**

Hysteroscopy **9500**

Myomectomy **1400**

Endometrial Ablation **1050**

Uterine septum **230**

other **950**

Laparoscopy **13500**

Myomectomy **3100**

Adnexal surgery **3600**

Total laparoscopic hysterectomy **2300**

Subtotal laparoscopic hysterectomy **1050**

major complications **< 2,0%**

conversions to laparotomy **< 0,1%**

Lymphonodectomy **250**



≥ 10 years ago:

$\leq 3-4$ myoma

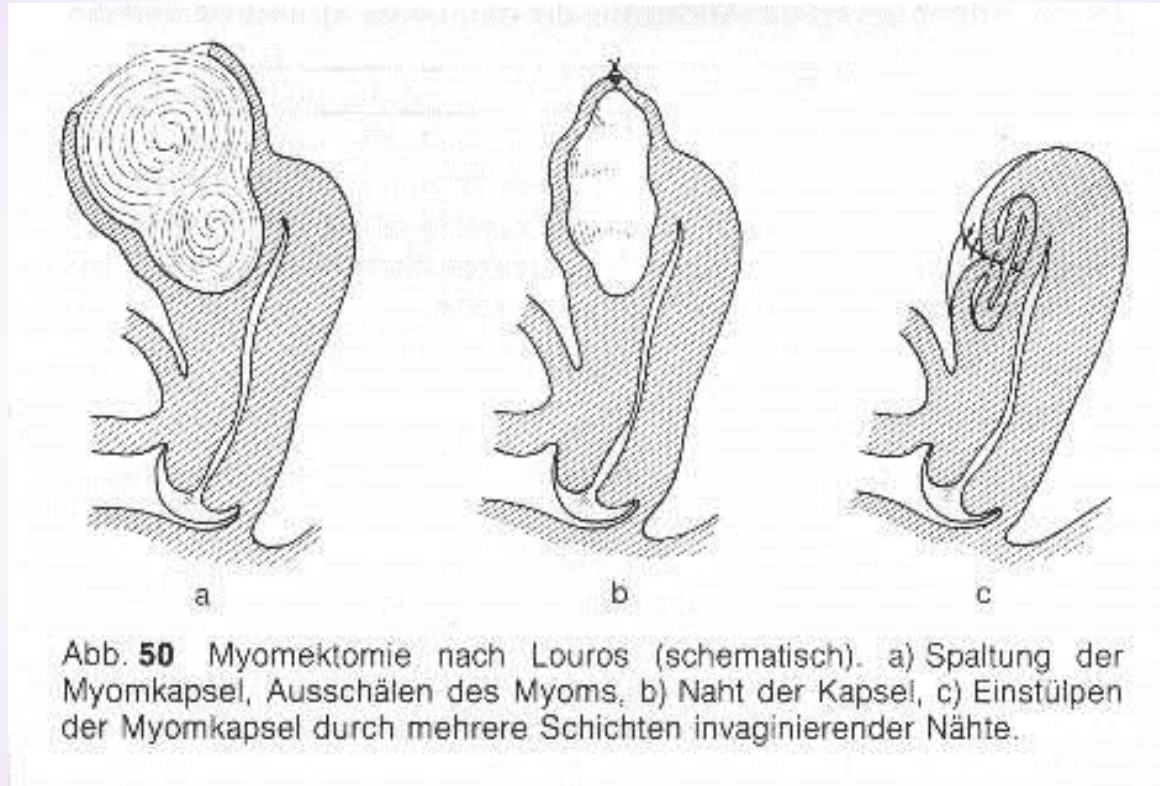
$\leq 6-7$ cm

= 100 cm³

**Laparoscopy was restricted
to easy surgical procedures**

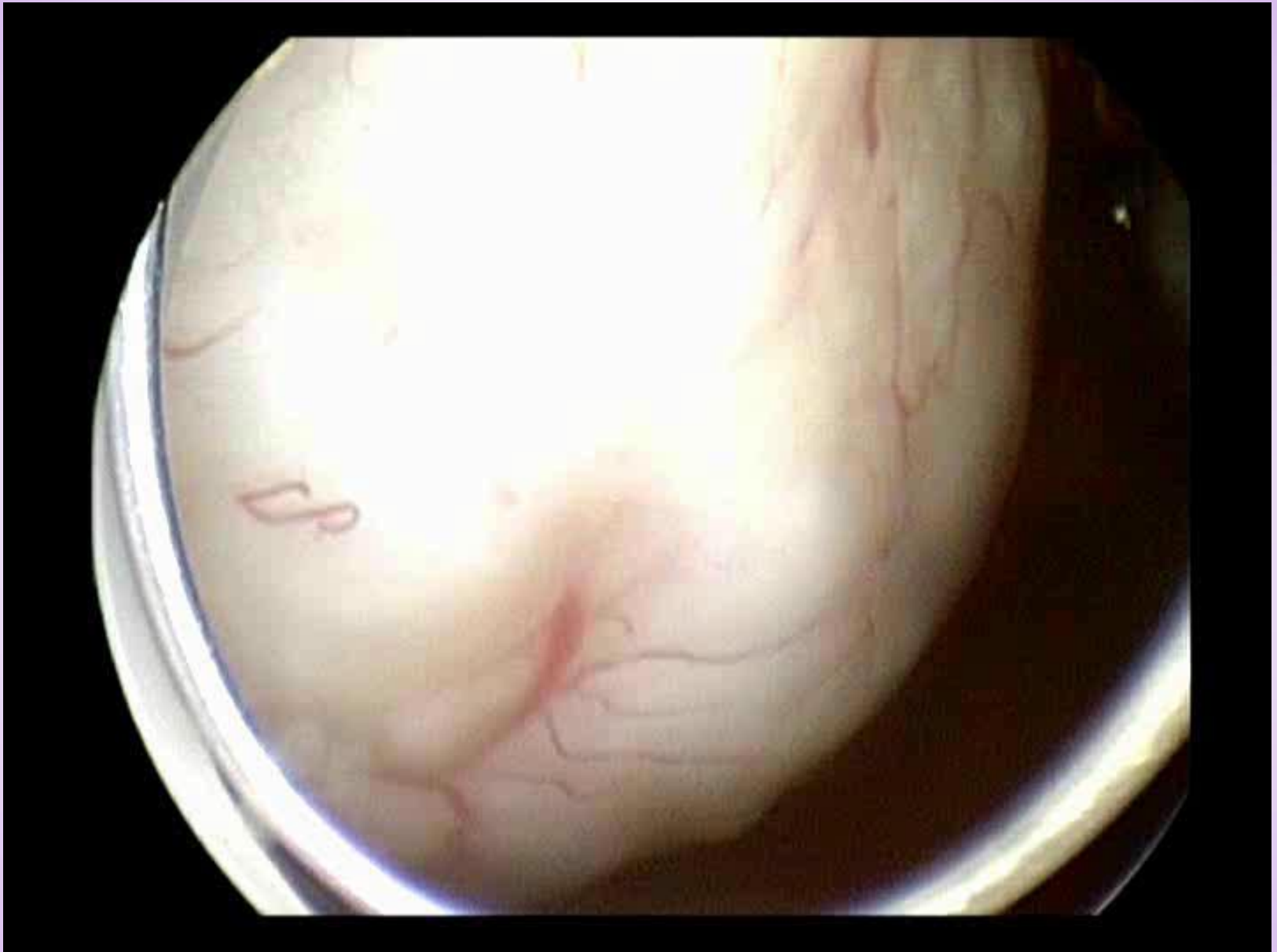
**Laparotomy was the domain of
complicated surgical procedures**

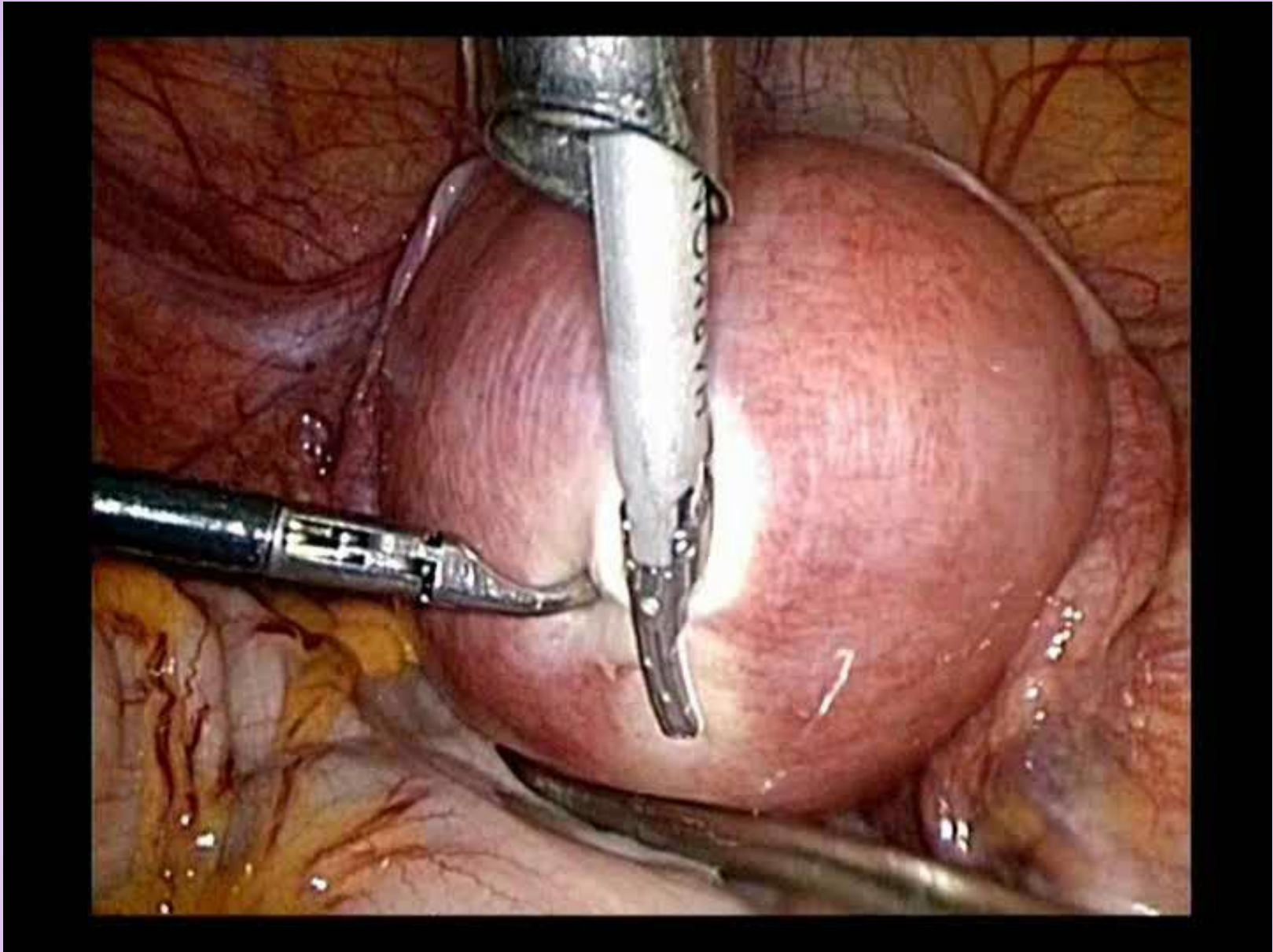




Myomectomy

∅ 4 cm submucous





(Advanced) myomectomy

Cases



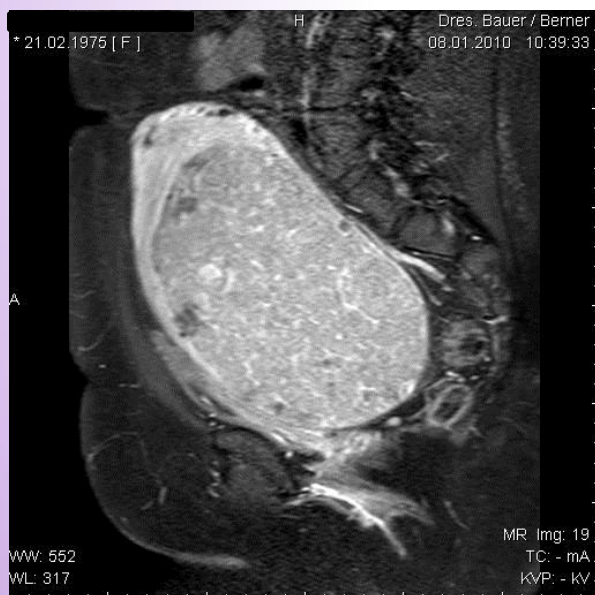
290 g
intramural

Laparoscopic
myomectomy



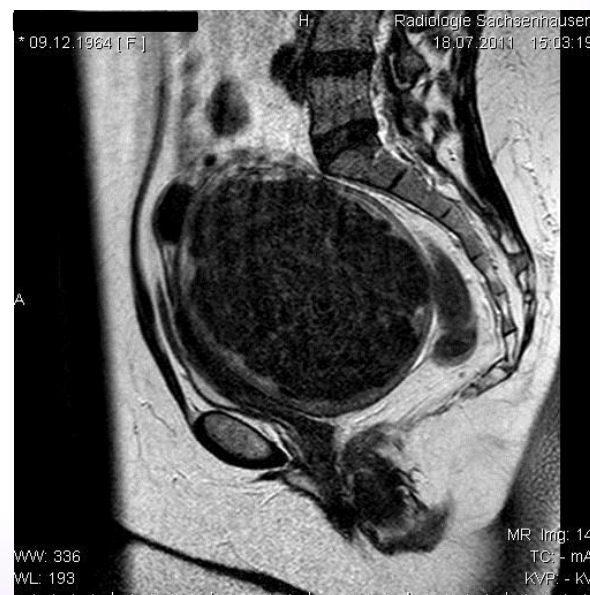
750 g
pediculated

Laparoscopic
myomectomy



1200 g
intramural

Laparoscopy &
conversion



1140 g
intramural

laparoscopic
subtotal
Hysterectomy
=
radical
Myomectomy!



Laparoscopic equipment:

**monitor, instruments, etc.
incl. morcellator**

Dissecting device:

no tissue destruction
myometrial hyperplasia = pregnancy

Coagulation device:

ultrasound (bipolar)

Suturing technique:

hemostasis, adaptation

... and last but not least:

**learning step by step
experience, some skill,
knowledge of risks**

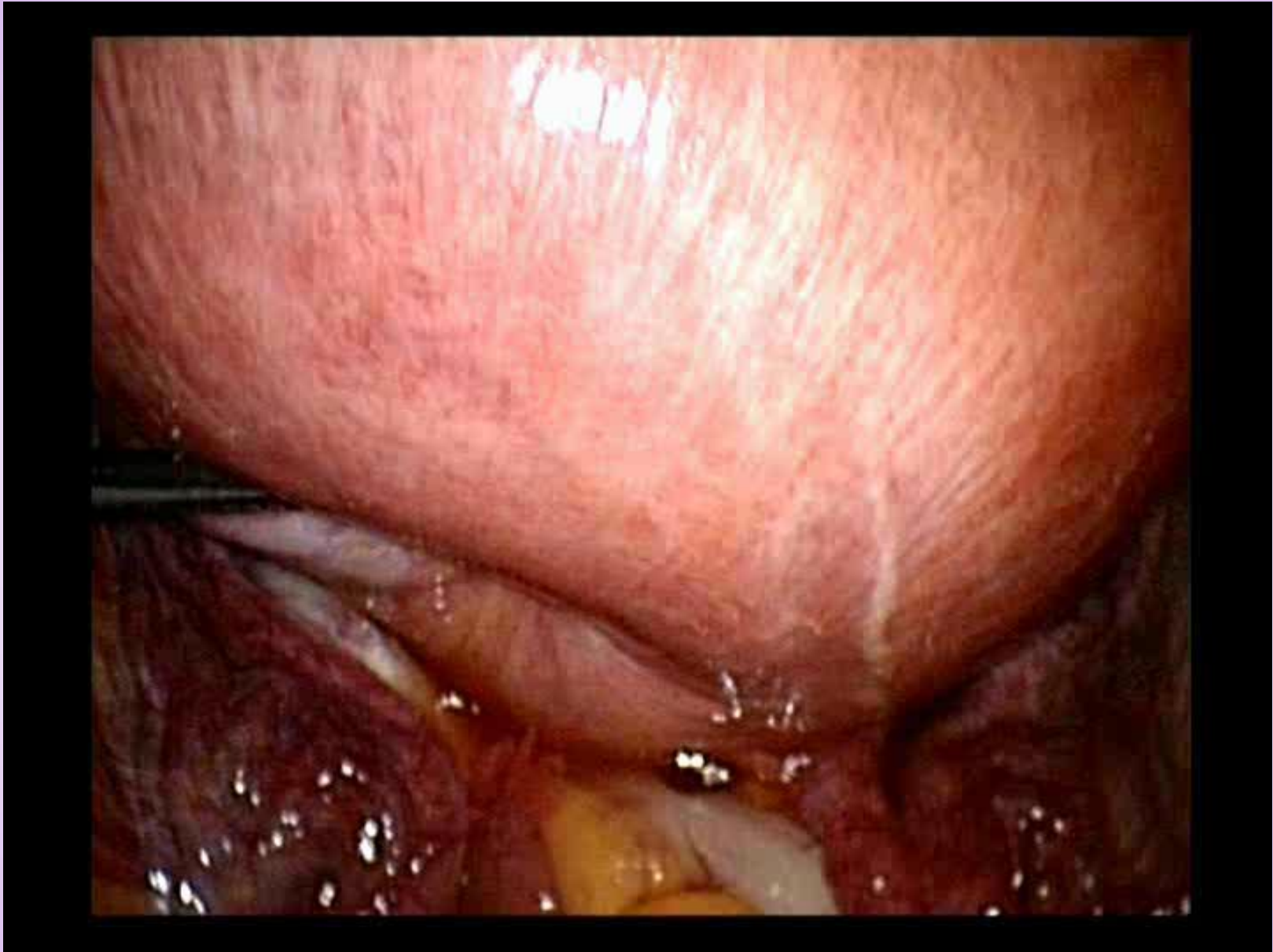
**If you guarantee all this, then you may perform myomectomy
of whatever size, location or number you will find ... but:**



**... you need also a clear diagnostic and
therapeutical concept!**

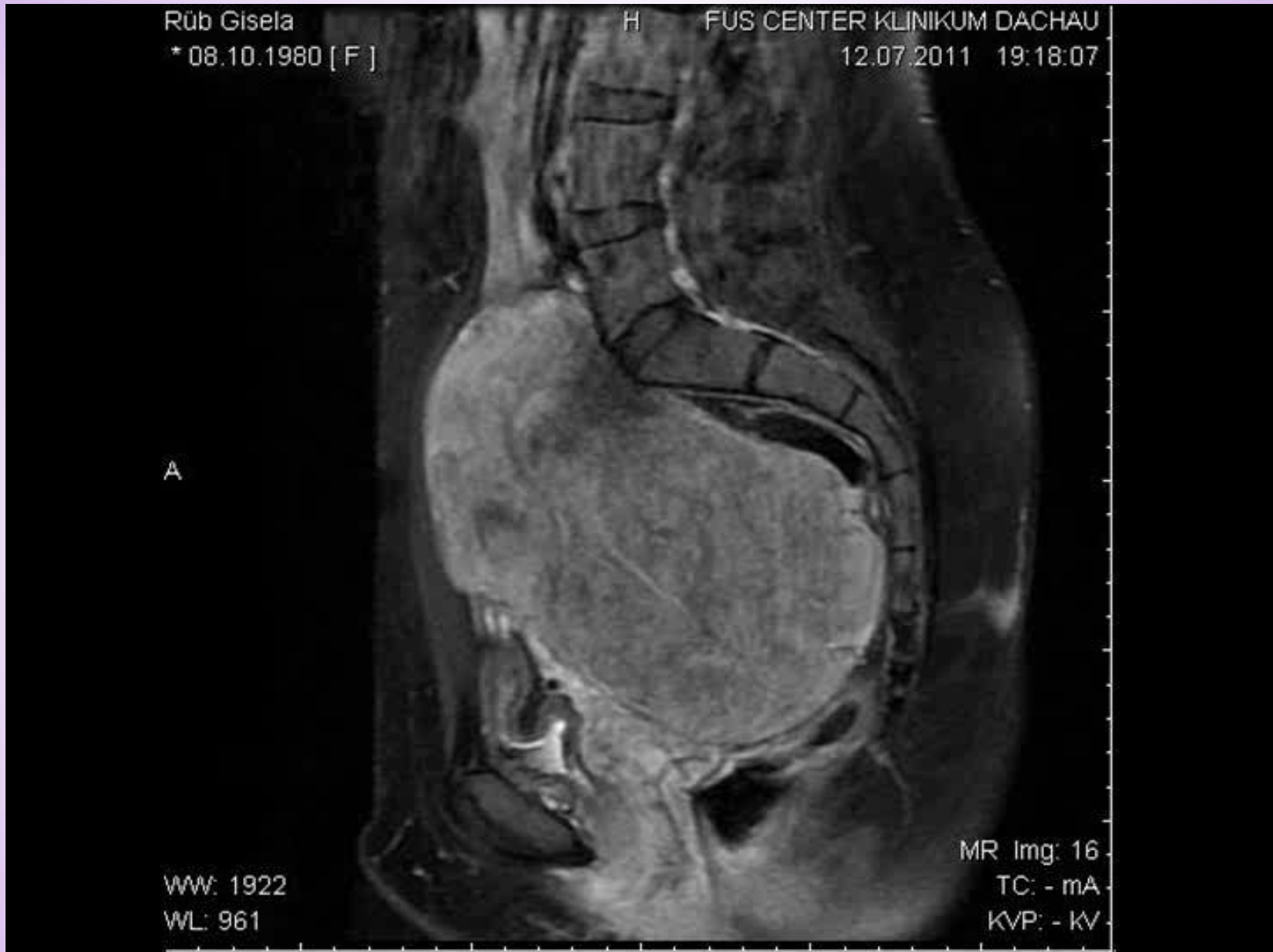
- | | |
|--|--|
| 1. Diagnosis: | fertility, bleeding disorder,
pain, organic damage |
| 2. Type of operation: | myomectomy
subtotal hysterectomy
total hysterectomy |
| 3. Adequate access: | laparoscopy
laparotomy |
| 4. Complication
management: | typical risks and complications
(detection and treatment) |



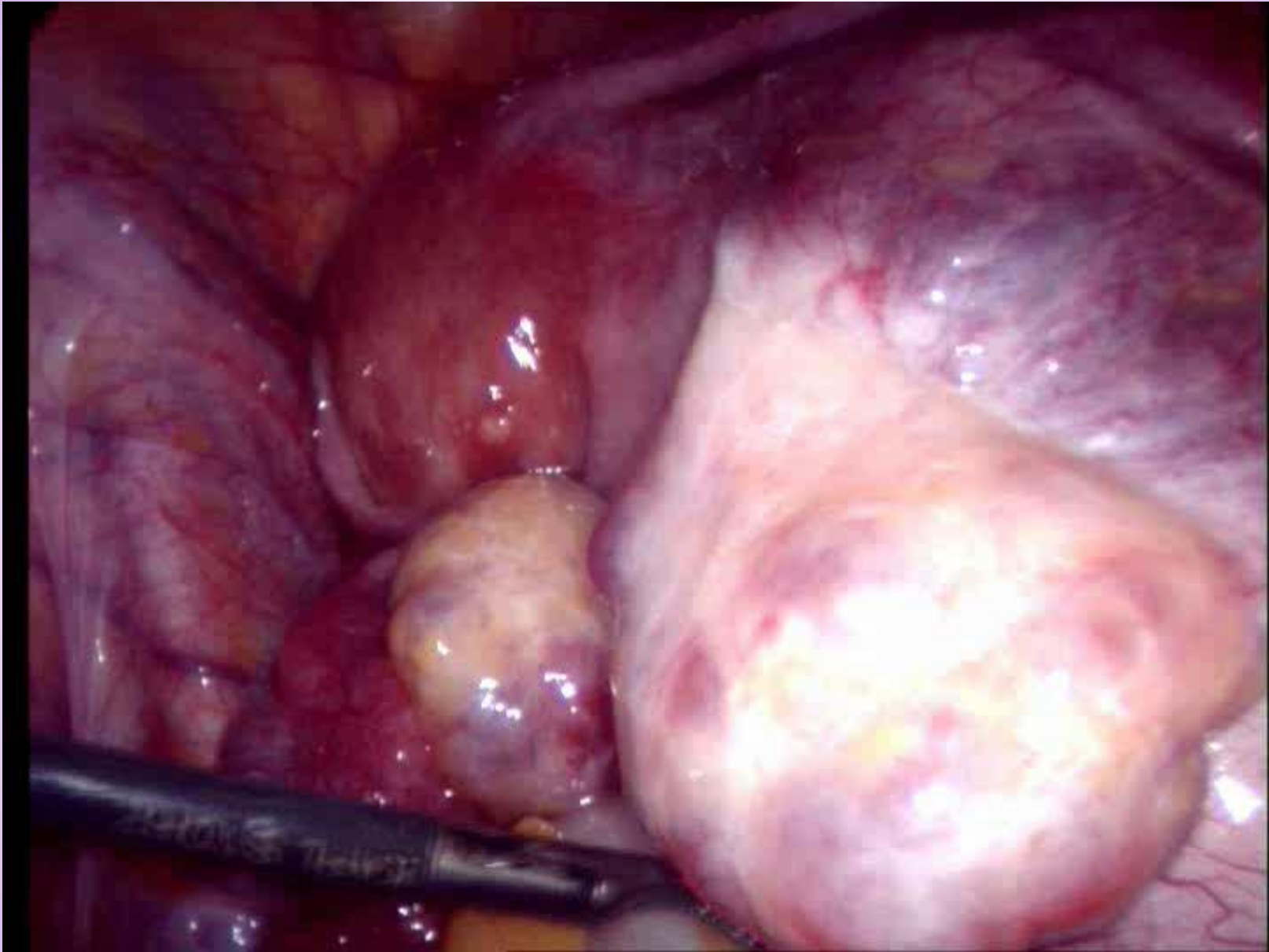


(Advanced) myomectomy

Ø 20 cm pediculated 750 g

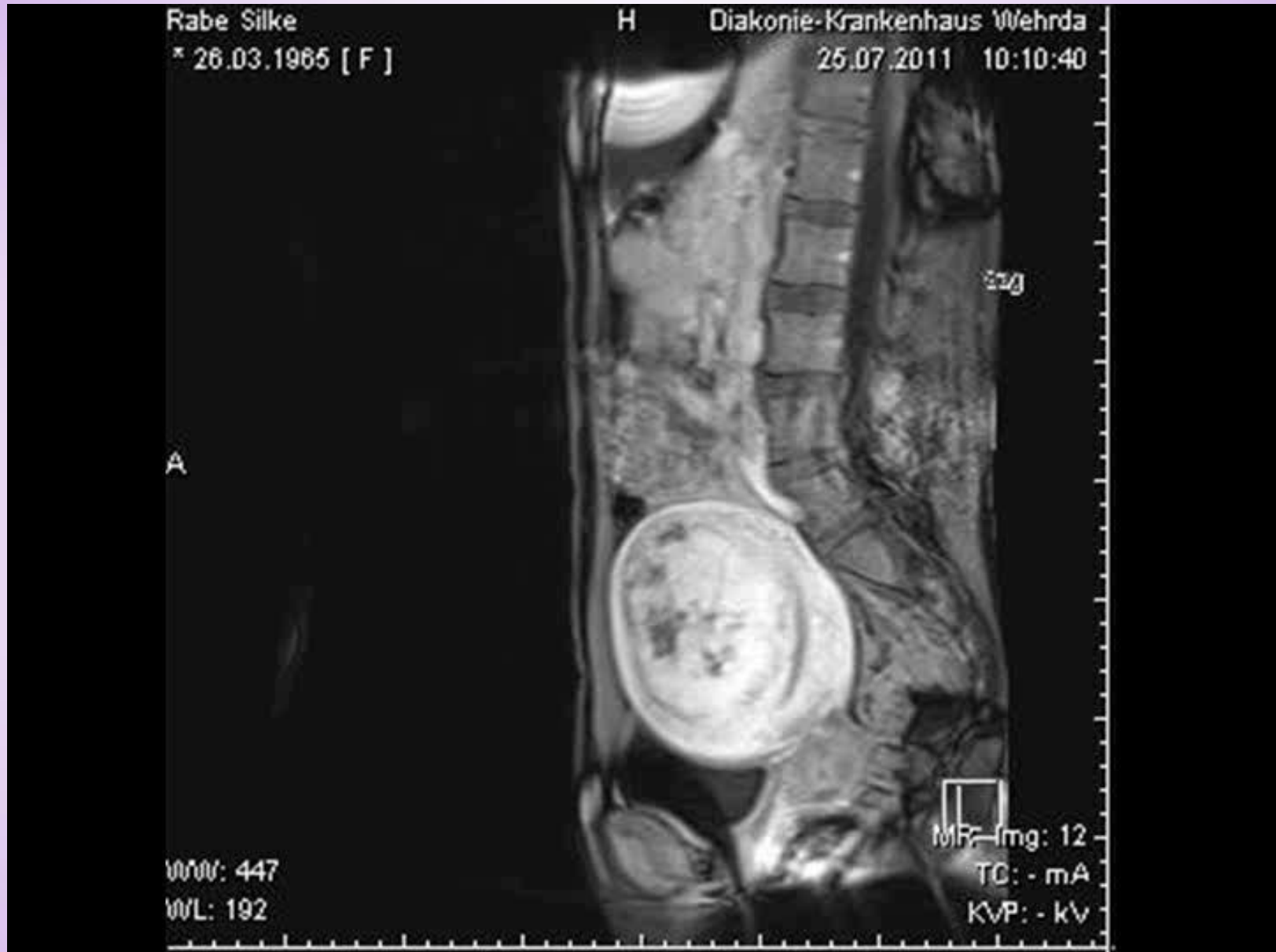


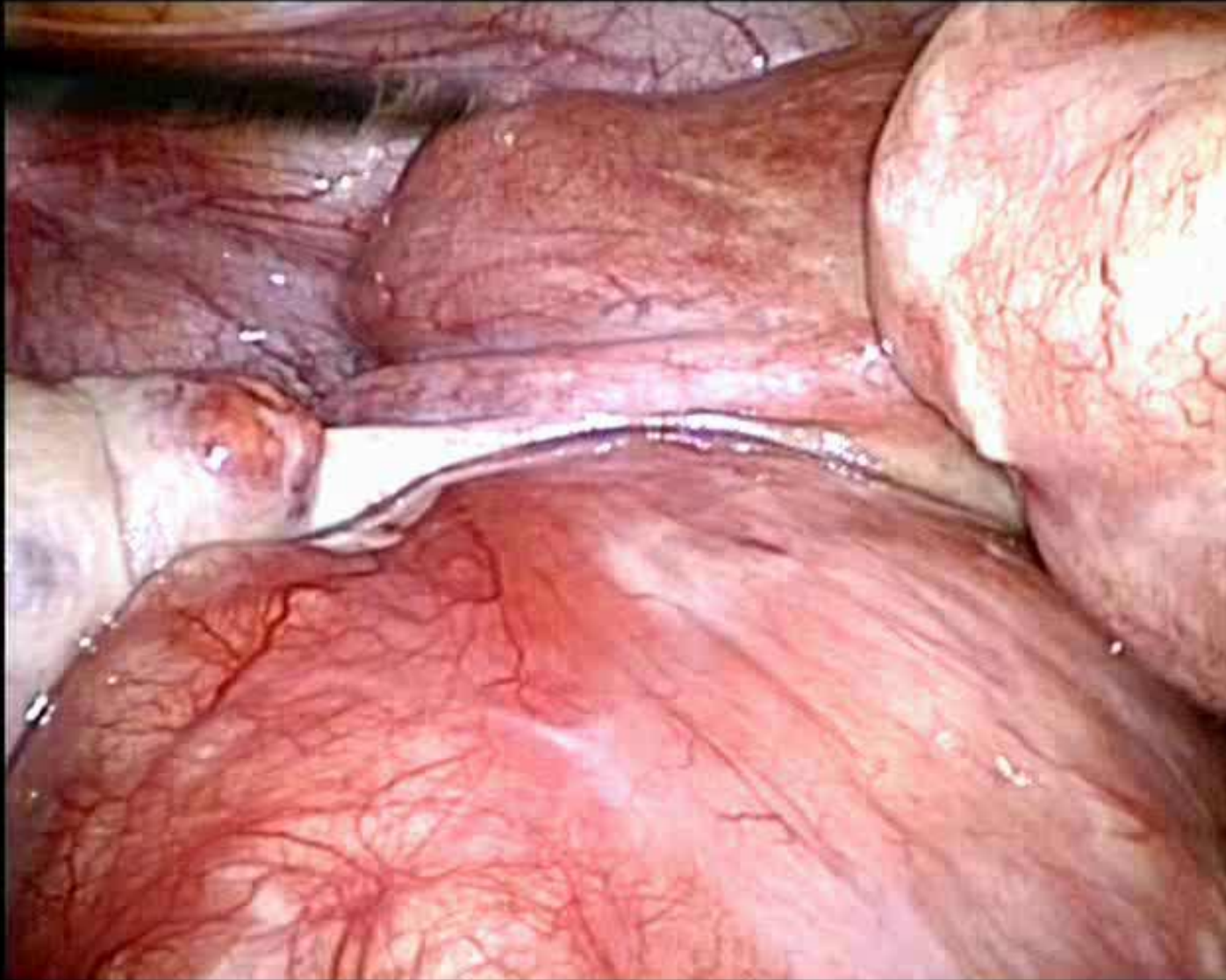




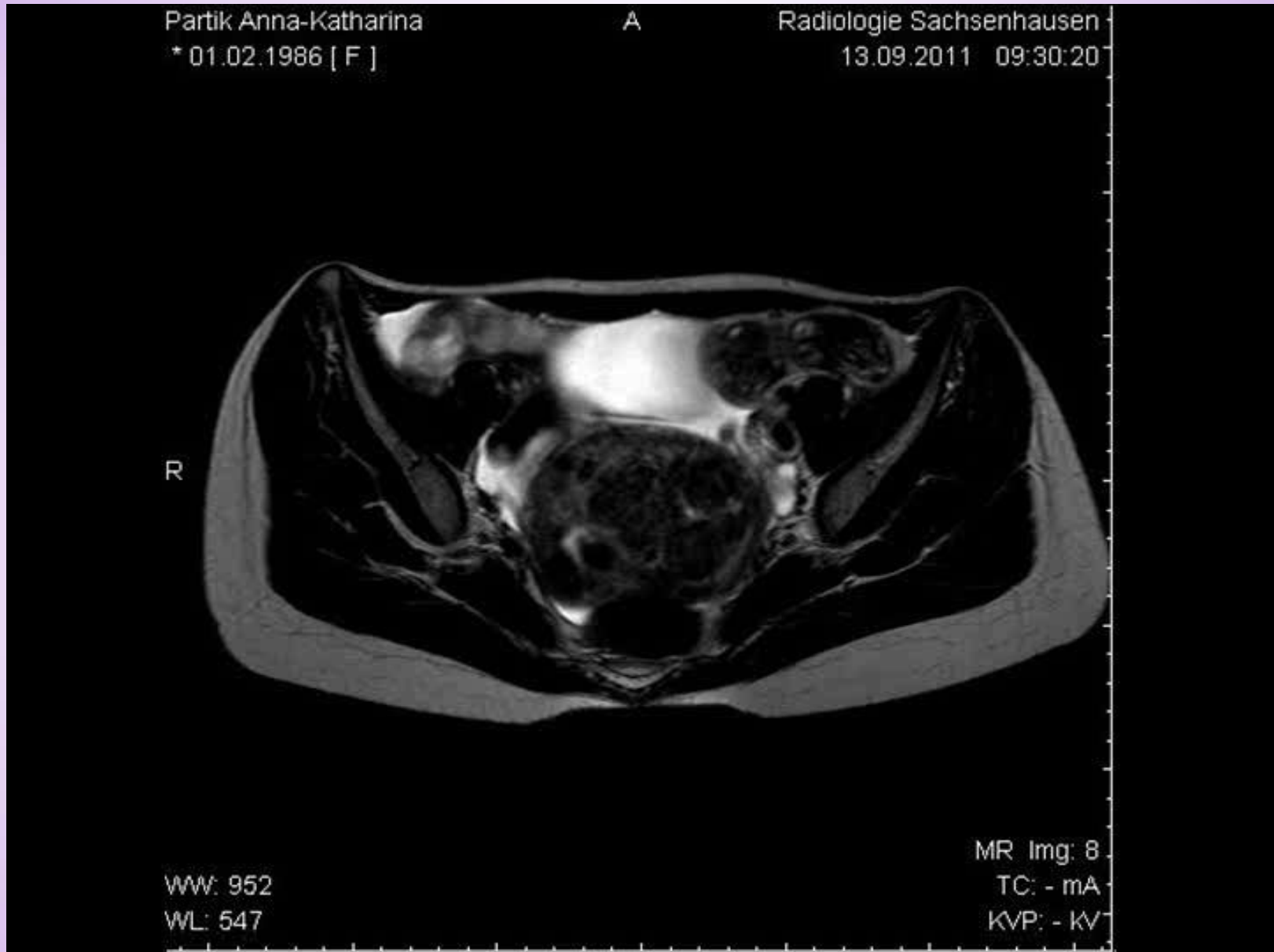
(Advanced) myomectomy

Ø 11 cm intramural 380 g



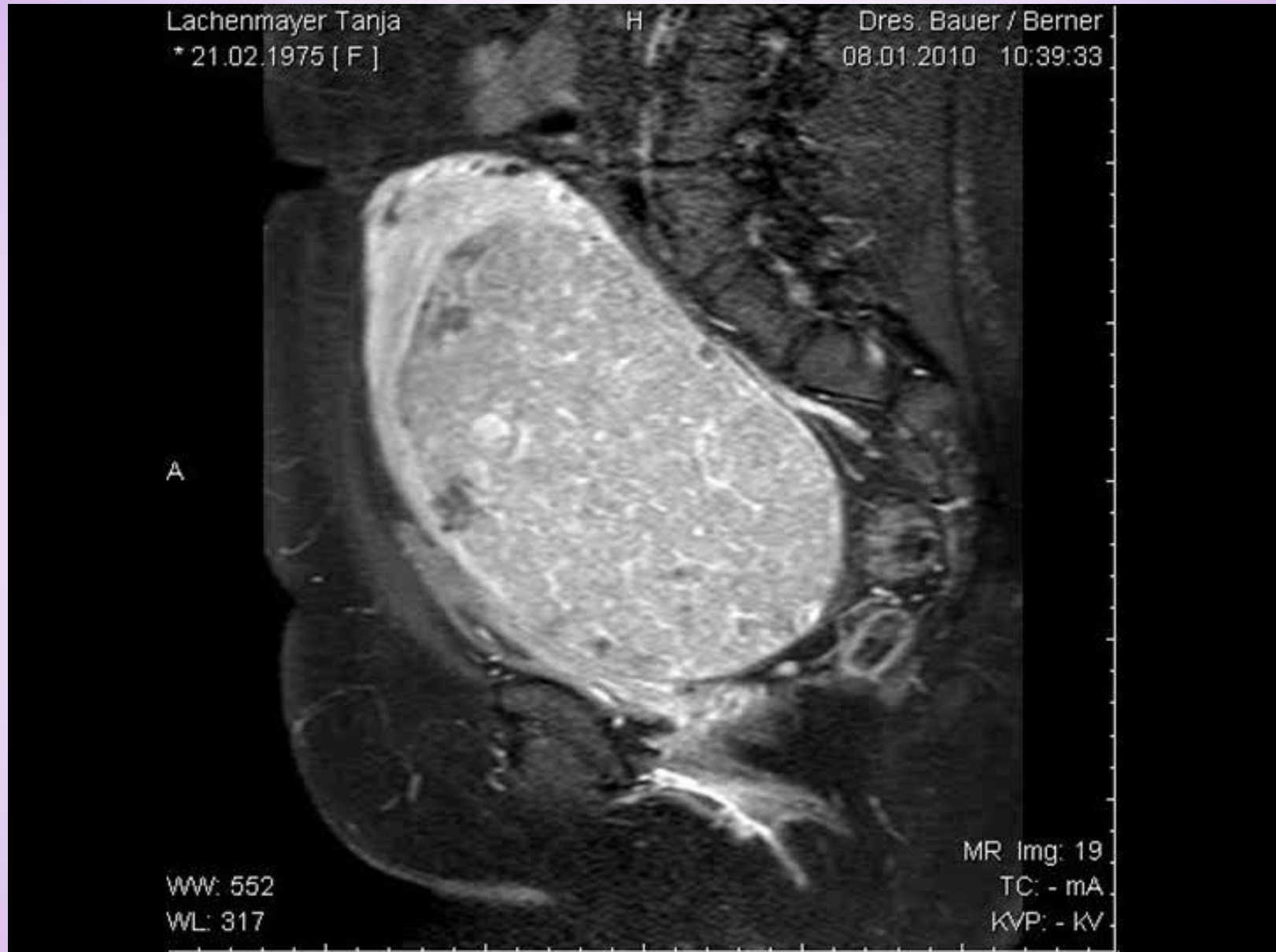


(Advanced) myomectomy hysteroscopy (8)+laparoscopy(11)



(Advanced) myomectomy

limits: \emptyset intramural 1200 g





4'53"



Be careful!



... it's a risky job!

Thank you for listening !

