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Laparoscopy

To diagnose certain problems, a doctor needs to look directly into the abdomen and at the reproductive organs. This can be done with laparoscopy.

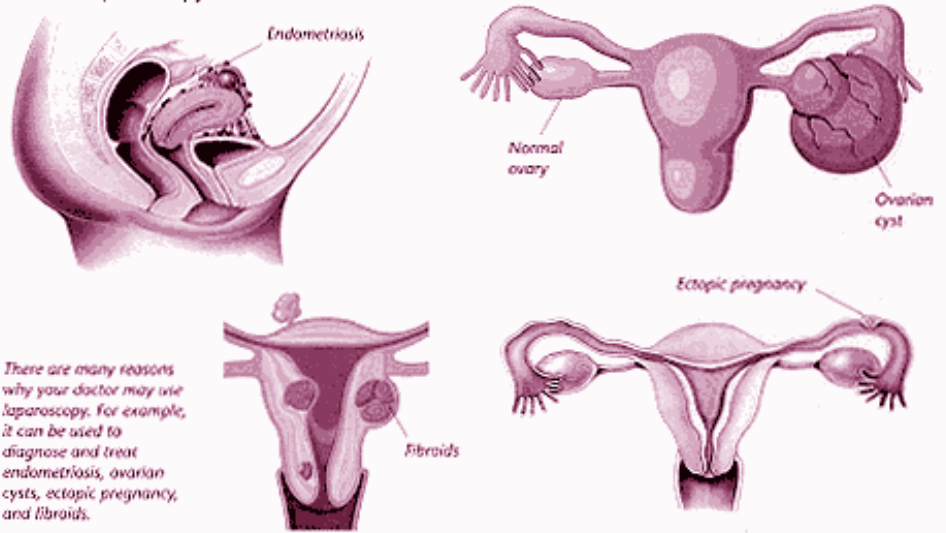
The word laparoscopy comes from the Greek words that mean "look into the abdomen." A laparoscope is a small telescope that is inserted into the abdomen through a small incision (cut). It brings light into the abdomen so the doctor can see inside. Laparoscopy is usually done on an outpatient basis—you don't have to stay in the hospital overnight.

This pamphlet explains why you might need laparoscopy. It also tells you what to expect during and after the procedure.

Uses of Laparoscopy

There are several reasons why laparoscopy may be recommended. If your doctor suspects that you have a certain problem, he or she may use laparoscopy to confirm the diagnosis. Laparoscopy may be used if you have problems with infertility or if you want to be sterilized. It is also used to check for ectopic pregnancy, causes of pelvic pain, and masses.

Uses of Laparoscopy



Besides using the laparoscope to look into the abdomen to diagnose a problem, your doctor can use it for treatment as well. For some procedures, laparoscopy has replaced the need for laparotomy. Laparotomy involves opening the abdomen to operate on reproductive organs.

Diagnosis and Surgery

Laparoscopy is often used to diagnose causes of abdominal pain. If the doctor finds that he or she can treat the condition during the procedure, diagnostic laparoscopy can turn into operative laparoscopy. This procedure is used to treat many health problems. Before undergoing laparoscopy, you and your doctor will discuss the procedure and any other treatment.

Endometriosis. Tissue like endometrium (the lining of the uterus) sometimes grows in places outside of the uterus. The tissue bleeds every month, as with a menstrual cycle. This condition is called endometriosis. It can cause pain, scar tissue, and infertility. One way to be certain that endometriosis is present is by laparoscopy. Sometimes, endometriosis can also be treated through the laparoscope.

Adhesions . Sometimes tissues in the abdomen stick together and form scar tissue called adhesions. This can happen because of infection, endometriosis, or surgery. Adhesions can cause pain. They often can be separated during laparoscopy.

Fibroids. Fibroids are growths that form on the inside, outside, or within the wall of the uterus. Laparoscopy can diagnose some fibroids.

Ovarian cysts. Ovaries sometimes develop cysts (fluid-filled sacs). These cysts may be harmless, causing only mild pain. Some cause infertility or menstrual disorders. Some ovarian cysts may disappear after a short time. If they don't, your doctor may choose to remove them during laparoscopy.

Hysterectomy. The laparoscope can be used to assist in a vaginal hysterectomy (removal of the uterus through the vagina). The laparoscope is used to help the doctor see inside the abdomen during part of the surgery. Laparoscopy can also assist with the removal of the ovaries. It can be done to remove ovaries alone, whether or not the uterus has already been removed.

Infertility and Sterilization

Women who have trouble getting pregnant may have laparoscopy to find problems like endometriosis or cysts. With laparoscopy, your doctor can also tell whether the fallopian tubes are blocked.

Laparoscopy is also used for sterilization. In this operation, the doctor uses the laparoscope as a guide to block the fallopian tubes by cutting, clipping, or burning them. It is meant to be a permanent method of birth control.

Ectopic Pregnancy

When a woman has pain in her lower abdomen during early pregnancy, the doctor may suspect an ectopic pregnancy. An ectopic pregnancy is one that may be located in the tube instead of the uterus. It may rupture the tube and cause abdominal bleeding that may require emergency surgery. The doctor can perform a laparoscopy to diagnose and often treat an ectopic pregnancy.

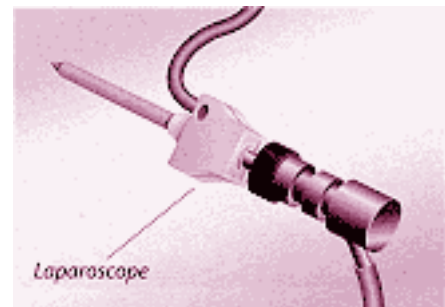
Benefits of Laparoscopy

In the past, most surgery involving reproductive organs was done by laparotomy. Now, many of these same procedures are done through the laparoscope. There are many benefits to laparoscopy—a shorter hospital stay, smaller incisions, and a shorter recovery.

The Procedure

You will be given medication to block the pain before the doctor begins the laparoscopy. The anesthesia used depends on the type of procedure, your doctor's advice, and your personal choice. General anesthesia is usually used so that you will not be awake. If local or regional anesthesia is used, you will be awake.

The laparoscope is placed through a small cut made below or

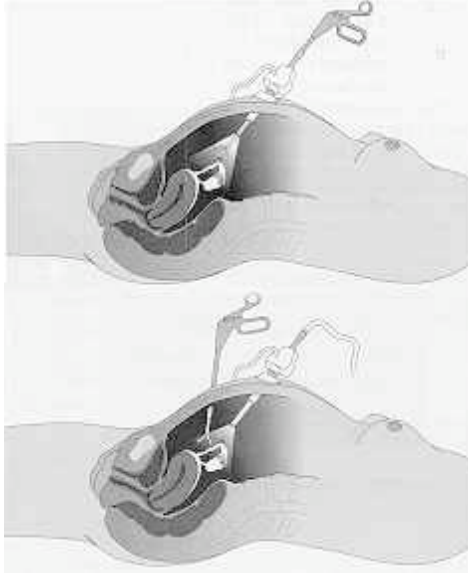


inside the navel (top). A second instrument may be inserted through another cut to move the organs into view (bottom).

After the anesthesia is given, a small cut is made below or inside the navel. A gas, such as carbon dioxide or nitrous oxide, is usually put into the abdomen. The gas swells the abdomen so the pelvic reproductive organs can be seen more clearly.

Your body will be tilted slightly with your feet raised higher than your head. This shifts some of the abdominal organs toward the chest and out of the way.

The laparoscope is placed through the cut. Another cut is often made above the pubic region. Through this cut, an instrument is used to move the organs into view. One to four small cuts may be made, 1/4-1/2-inch wide. An instrument may be placed in the uterus through the vagina as well in order to move the uterus during the procedure.



Usually, the laparoscope projects images of the surgery onto a television screen. This makes the image larger and easier for the doctor to see. These images can be photographed for later viewing.

Other surgical instruments can be inserted through the scope or through another small cut. Various types of instruments can be used:

Mechanical surgical instruments, such as scissors, forceps, and clamps.

Electrosurgical instruments that use electric current through the laparoscope to perform surgery.

Lasers that use a high-energy light beam to perform the same procedures as electro-surgery.

After the procedure, the instruments are removed and the gas released. The cuts are then closed, usually with stitches that dissolve. In a few hours you can go home. You should plan to have someone take you home and stay with you, at least for awhile.

Possible Problems

Although problems seldom occur with laparoscopy, there can be some complications. You may have some bleeding, reactions to the anesthesia, or injury to other organs. The most common organs injured during the procedure are the blood vessels that surround the lower abdomen, the bowel, and the urinary tract. A follow-up laparotomy may be needed, which will require that you be admitted to the hospital. There is also a risk of infection after the procedure.

More common problems include:

- Nausea
- Pain around the cuts made in your abdomen
- Scratchy throat if a breathing tube was used during general anesthesia
- Abdominal cramps
- Discharge (like your period) that lasts a few days
- Swollen abdomen
- Tender navel
- Shoulder pain

Call your doctor if you are bleeding from the incision, if you have a fever, or if you are unable to urinate.

Recovery

The recovery time from laparoscopy is much shorter than that from regular surgery. It is safe to resume normal activities as soon as you feel up to it, usually within a few days. If you are sexually active, talk with your doctor about when you can have sex again.

Finally...

Laparoscopy can be useful in diagnosing and treating many gynecologic problems. It has taken the place of surgery in some cases and offers the benefits of fewer problems and shorter recovery.