

Total laparoscopic Hysterectomy

A total laparoscopic hysterectomy (TLH) is an operation to remove the uterus with the aid of an operating telescope called a laparoscope.

Laparoscopic surgery requires only a few small incisions in your abdomen. The major benefit of this kind of hysterectomy is that you will not need to have a large cut in your abdomen and your recovery is usually much faster.

Your cervix is also removed during this operation. If needed, the ovaries and fallopian tubes may be removed. Dr Saha will have an extensive discussion with you prior to your surgery to formulate an individualized surgical plan for you.

What to expect following surgery

Usual length of stay in hospital in most cases, you will be admitted to hospital on the day of your operation. You will usually require an overnight stay and be able to go home the next morning. If you have had a more difficult operation for severe endometriosis, you may need to stay in hospital for 1-2 nights.

During the first 24 hours you may find that you feel more sleepy than usual, and your judgement may be impaired. You will need someone to collect you from hospital once you are discharged home.

Catheter

A catheter (tube) is put in your bladder during laparoscopic excision of endometriosis. This is to ensure your bladder does not overfill during the operation and reduces the risk of bladder injury. The catheter is usually removed the following morning.

Scars

You will usually have three or four small scars on your abdomen. One scar will be within the tummy button, one on the left side, one on the right side, and sometimes one in the middle at the top of your bikini line. Each scar is 0.5 - 1cm in length. Sometimes we may have to extend one to manage the endometriosis.

Stitches and dressings

The cuts on your abdomen will be closed with dissolvable stitches and will usually be protected by clear dressings after your operation. You will usually go home with the dressings in place, and we would advise you remove them after 48 hours. This is best done during a bath or shower. We would expect the stitches to dissolve within 14 days.

A small amount of vaginal spotting is normal after the surgery. If your bleeding increases significantly you should contact Dr. Saha for a review. You should avoid sex, tampons, and strenuous exercise for six weeks until your post-operative appointment.

Incisional Numbness

You may feel a “pins and needles” sensation at the incision site. This is due to the nerves being cut. Over time, the nerves will heal, and the sensation will subside. If you have bothersome symptoms don't hesitate to contact Dr Saha for further discussion.

Pain and discomfort

You can expect to feel pain in your lower abdomen for a few days after your operation. The area around your scars may feel particularly sensitive. You may also have pain in your shoulder. This is a common side effect of laparoscopic surgery and will get better over the first 24-48 hours. Gentle mobilising can help. When you are discharged home from hospital, you will be advised to take regular painkillers. We recommend you have a supply of Paracetamol and/or Ibuprofen at home as these are not supplied by the hospital pharmacy. You may also be advised to take a painkiller that contains opioids; this will be supplied as a prescription from the hospital for you. Taking regular painkillers will enable you to feel more comfortable after your operation, get out of bed sooner, stand up straight and be able to walk around easier. This will all help speed up your recovery and reduce the risk of blood clots forming in your legs and lungs.

Starting to eat and drink

You are likely to have a drip in your arm to provide you with fluids after your operation. This will be removed once you are able to eat and drink again. In most cases, you will be offered some water in the theatre recovery area once you have woken up from your anaesthetic. You will be offered more water or a cup of tea when you are back on the ward. You will also be offered something light to eat if you feel hungry.

Washing and showering

You should be able to have a bath or shower the day after your operation. This can help to remove the sticky postoperative dressings over your scars. It is safe for the scars to get wet. We would recommend you gently pat them dry afterwards with a tissue or let them dry in the air. Loose clothing/waistbands are advised for the first week or so after your operation.

How to reduce the risk of a blood clot after laparoscopy?

Some common additional risks include smoking, being overweight, diabetes or having had a previous blood clot in your leg or lung. You will be offered some graduated compression stockings to wear during your stay in hospital. You will also be prescribed a daily injection of a blood thinning agent (called Clexane) while you are in hospital. We would recommend:

- Staying as active as possible
- Staying hydrated
- Performing gentle exercises while you are sitting
- move foot up and down as quickly as you can for 30 seconds on each side, move foot in a circular motion for 30 seconds on each side bend and straighten one leg at a time three times, then repeat on the other side

Keep your bowels working

It is common to experience a short-term change in your bowel habits after an operation. Constipation, and associated bloating, is the most common complaint. If you already have

a tendency for constipation, we recommend starting some gentle laxatives (Movicol, Lactulose) from your pharmacy before your operation. Drinking plenty of water, eating fresh fruit/vegetables/fibre rich foods and keeping active also helps. If you do struggle with opening your bowels, it can help to place a small footstool under your feet when you are sitting on the toilet

When should I seek advice after a laparoscopic hysterectomy?

Dr. Saha will review you 4 weeks' time following your surgery

We would anticipate that the overall recovery from your operation will take up to six weeks. You should seek medical advice and contact Dr Saha's room or email Dr Saha if you have any concerns. drsumisaha@joywomenshealth.com.au.

- Burning/stinging after you pass urine or needing to pass urine more often. This may indicate an underlying urine infection. In most cases this will settle with a short course of oral antibiotics.

-Red, painful, oozing skin around your scars. This may indicate a wound infection. In most cases this will settle with a short course of oral antibiotics.

-Worsening abdominal pain This may be constant or made worse by movement. It may be associated with other symptoms including nausea, vomiting, loss of appetite, a temperature, difficulty opening your bowels or pain when you pass urine.

-If you have severe pain, or pain that is getting worse many days after your operation, it is important that you are seen by a doctor. You may require review and readmission to hospital.

-A painful, red, hot swollen leg and difficult weight bearing may indicate an underlying deep vein thrombosis (DVT). If you are experiencing pain in your chest, shortness of breath, cough up blood. Please contact Dr. Saha by a phone call or an email.

If you require an urgent review, present to your closest Emergency Department.

In the event of an emergency call 000 immediately for ambulance care.

Getting back to normal

Around the house:

In the first few days after your operation, you will need to ensure you rest. However, it is important to start doing some of your normal daily activities and build up gradually. You may find the main limitation to activities will be abdominal pain. If you experience pain, you should try doing a little less for a few days.

We would advise you to avoid lifting heavy objects, such as shopping bags, a vacuum, or young children for 4 weeks after your operation.

Exercise

You will be able to walk around on the first day after your operation. Over the next few weeks, we would expect you to be able to increase your activity levels towards normal again. Swimming can be resumed within 2-3 weeks, so long as you are comfortable, and your wounds have healed. Running, cycling, exercise classes or contact sports should not resume until 4-6 weeks after your operation

Travel plans

It is safe to travel as a passenger in a car, on a bus or train in the first 1-2 weeks after your operation. If you are going on a journey over four hours, we would recommend you keep well hydrated, wear flight socks and try to keep your lower legs moving. If you plan to travel abroad, you will need to contact your travel insurer about potential restrictions.

Returning to work

The length of time you require off work after your operation will depend on the complexity of your procedure and the type of job you have. It would be reasonable to consider a return to work 4 weeks after the surgery.

All decisions about return to work should be discussed with your line manager and occupational health department. Dr Saha will provide you with a medical certificate prior to your discharge from hospital.

References

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