



# Key Hole Surgery

What you need to know



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**September 2015**

# **OPERATIVE LAPAROSCOPY**

I have recommended for you to have a major operation through laparoscopic (keyhole) surgery. Keyhole surgery is a technique whereby major gynaecological surgery is performed through 3-5 small skin incisions less than 1cm. This type of surgery requires specialised instruments and is performed through a video camera.

## **WHY PERFORM KEYHOLE SURGERY?**

The advantages of performing the operation through keyhole surgery is that:

- Your hospital stay will be less.
- Your general recovery from the major operation will be less compared to having the operation performed the conventional way through a big tummy incision, especially your post operative pain will be significantly less.

I will discuss with you whether you are suitable to have the operation through keyhole surgery.

## **REASONS FOR PERFORMING KEYHOLE SURGERY**

Common indications for performing keyhole surgery include:

- (1) Removal of cysts on the ovary.
- (2) Removal of fibroids on the uterus.
- (3) Treatment of severe endometriosis.
- (4) Hysterectomy. Laparoscopic surgery is an established technique to perform a hysterectomy in gynaecology today.
- (5) Prolapse surgery i.e. if your bowels/bladder are falling out or if you have incontinence, laparoscopic surgery is the newest technique to fix this.

Generally most gynaecological operations can be done through keyhole surgery. Operative laparoscopy requires great skill as the operation is performed through a video camera.

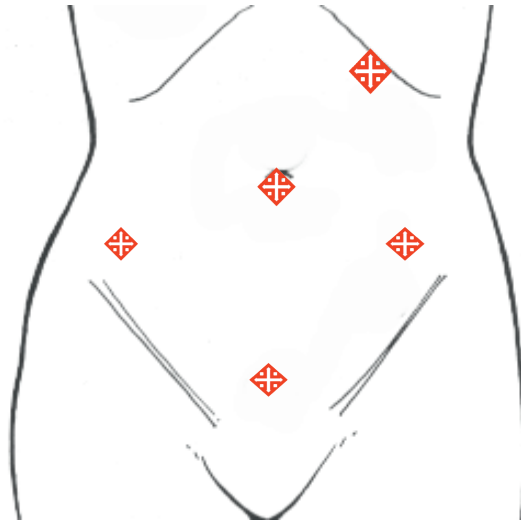
## PRE-OPERATIVE WORKUP

You will need to have special preparations made before having keyhole surgery. This will include:

- Having a number of blood tests done. This is the same as if you are having the operation done through a conventional incision.
- **Picoprep.** This is a horrible bottle of salty fluid which you must take the night before surgery or the morning of your surgery, depending on the time scheduled for your operation. This will make you have diarrhoea but it is very important as this empties your bowels and makes your operation **easier and safer** to do. You can obtain Picoprep from the chemist. This consists of 45mls of liquid which you can dilute up to 100mls. You should only have fluids for the day prior to the surgery.
- You cannot have anything to eat or drink from 12 o'clock midnight the day before surgery (if your surgery is scheduled for the morning). If your surgery is scheduled for the afternoon, you must fast from 6 o'clock that morning.

## DETAILS OF THE OPERATION:

- A telescope will be inserted through your belly button, in the majority of cases. This will then allow me to survey your internal pelvic organs and decide where to put the other incisions and ports (to put instruments through). Occasionally I may put the first port just underneath your rib cage on the left-hand side. This will occur if you have had a previous surgery and have a midline incision, (this is because there is a greater risk of adhesions after having a midline incision).
- A further 4-5 small cuts of less than 1cm will be made to put further instruments in to perform the operation.
- You will be asleep and a tube will be put down your throat to help you breath during the operation.
- The duration of the operation will last between 1-3 hours. Occasionally this may be longer.
- You will also have bandages wrapped around your legs (pneumatic calf compressors) that will prevent you from getting clots in the leg.



## POST OPERATIVE COURSE

After the operation you can expect the following to occur:

- You will be quite sore in your tummy for the first 24-48 hours. This is normal and is related to having a lot of CO<sub>2</sub> gas in your tummy from the operation.
- You may also have some fluid leaking out through your tummy as well. Unless this is frank blood there is no need to worry as I have put approximately 1 Litre of fluid in your tummy to try and reduce the pain.
- You may expect some bleeding from your vagina particularly if you have had a hysterectomy.
- You will also be wearing stockings (TED stockings) if you remain in hospital. This is to prevent you from getting clots in your legs.
- If you are feeling well then you can have sips of fluid and some biscuits and sandwiches on the day of the operation afterwards. Generally the following morning you should be having a light diet.
- You should expect to go home after 1-3 days in hospital. Sometimes you may leave the same day of the surgery. I will discuss your progress with you and decide on when to discharge you.

**If you had an open operation performed you would stay in hospital for 5-7 days in hospital.**

## AFTER DISCHARGE FROM HOSPITAL

Now that you have gone home you need to rest as much as possible, particularly for the first week. Remember you have had a major operation and despite the fact that you are at home you should not over exert yourself. .

After the second or third week you can slowly return to light activities. I would like to see you in the rooms approximately 3-4 weeks after the operation to see how your complete recovery has been. In general you may return to normal activities after approximately 4 weeks, however I will advise you about when you can return to normal activities.

## COMPLICATIONS

As with any major operative procedure there are some complications that you also need to be aware of. Remember these complications are **uncommon** and as with any operative procedure including having a laparotomy there are risks involved. The most important complications you should know about are:

- (1) **Bowel injury.** There is a possibility of damage to your bowels particularly if you have had previous abdominal surgery and have a lot of scar tissue. In general if this is recognised at the time of surgery this will be repaired.
- (2) **Haemorrhage and bleeding.** You can imagine that there are big blood vessels supplying your uterus. There is always a small risk of haemorrhage and the need for a blood transfusion. In general however the **risk of haemorrhage is lower with keyhole surgery compared to a laparotomy.**
- (3) **Injury to your bladder and ureters** (the tube between the kidneys and the bladder). Again the risk of this is increased if you have had previous surgery or if you have bad scarring from your disease e.g. endometriosis. If this occurs generally it can be repaired at the time of operation.
- (4) **The need for a laparotomy** (standard operation through a bigger skin incision). Despite the fact that in the majority of cases the operation can be performed through keyhole surgery, at times you may need to have a laparotomy because either there have been complications and this would be managed better through a large incision or the surgery is too difficult because of too much scar tissue and adhesions.

Post-operative complications may also occur, **however these too are also are uncommon:**

- (1) Haemorrhage i.e. bleeding and the need to have a blood transfusion and/or be taken back to theatres.
- (2) Infections. Infections are not uncommon particularly chest infections as well as urinary tract infections. Fortunately these can often be treated with antibiotics and may delay your recovery slightly. To prevent this you may be given antibiotics to prevent this during the operation.
- (3) Clots in your legs and in your lungs. Again this is uncommon. To prevent this precautions will be taken during the operation as well as after the operation.

**BE REASSURED THAT THE SERIOUS COMPLICATIONS ARE UNCOMMON. IN THE MAJORITY OF CASES NO COMPLICATIONS OCCUR.**

### COMPLICATIONS

- Bowel injury
- Haemorrhage
- Bladder/Ureter injury
- Infection
- Blood Clots
- Laparotomy

## COSTS

I will discuss with you the costs of the surgery during the consultation. Please note:

- (1) Specialised instrumentation is needed to perform keyhole surgery. This is expensive however it is absolutely necessary, to make the operation proceed smoothly and safely.
- (2) Greater time is also needed to perform this type of surgery. You can imagine that it is not easy to remove a large mass through incisions that are less than 1cm.
- (3) Greater skill , training is required to perform this surgery. Be reassured that I have had significant experience in performing this type of surgery. I have been to the United States as well as China to learn these specialised skills and I lecture and teach other doctors how to perform this type of surgery.

**Remember your hospital stay will be less and your recovery quicker compared to a standard open operation.**

## CONCLUSIONS

Laparoscopic surgery is the modern technique to perform a major operation through very small skin incisions. It is the technique that most surgery can be performed, but requires greater skill and training. The advantages to you, the patient, for undergoing this type of surgery are:

- (1) Your hospital stay will be less.
- (2) Your recovery time will be less.

Be reassured that keyhole surgery is a very safe operation and major complications are uncommon in skilled hands. Keyhole surgery is most upto date way to do surgery today. If you have any further questions about your operation please do not hesitate to discuss them with me.



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