

THE FERTILITY CENTER OF OREGON

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LAPAROSCOPY AND LASER LAPAROSCOPY

What is it? Laparoscopy is a minor surgical procedure to visualize and evaluate the anatomy of the pelvis including the uterus, fallopian tubes, and ovaries. A slender telescope-like instrument (laparoscope) about the diameter of a pencil is inserted through the umbilicus (belly button) under general anesthesia. The laparoscope contains a lens and a light source to directly visualize the pelvic organs. The procedure is done at the McKenzie Surgery Center or Short Stay Unit and requires only about 5-6 hours in an outpatient treatment facility.

How is it done? Laparoscopy is usually scheduled several weeks ahead of time and performed in the first 7-10 days after the end of a menstrual period. A physical and pelvic examination is done in the doctor's office 1-2 days before the surgery. You will be asked to arrive at the Surgery Center about two hours before your scheduled time. The nurses will take you into the operating room and the anesthesiologist will give you medicine in an I.V. for general anesthesia. A pelvic exam is then done by your doctor and a small instrument is inserted through the vagina into the cervix in order to move the uterus during the laparoscopy. A sterile, colored water solution may also be injected through this instrument to test for tubal patency. The abdomen is washed with antiseptic and a ¼" incision is made just below the navel. A needle is then introduced into the abdomen through this incision and carbon dioxide (CO₂) gas is gently instilled to allow visualization. The needle is then removed and the laparoscope is inserted through the same incision. One or two smaller incisions (¼") are made in the lower abdomen below the hairline for insertion of a probe or other small instruments used during the procedure. If everything is normal after careful inspection, the operation takes only about 30-45 minutes. The CO₂ is then allowed to escape and the instruments are removed. The incisions are closed with fine dissolving sutures and Band-Aids. You are awakened from anesthesia and taken to a recovery room. As soon as you recover (usually 2-3 hours), you will be discharged and can be taken home by a friend or relative.

What can you see at laparoscopy? This minor surgery procedure allows an excellent view of the uterus, fallopian tubes, ovaries, and lining of the abdomen around the pelvic organs. Your doctor may find evidence of infections, adhesions (scar tissue), ovarian tumors or cysts, tumors of the uterus (fibroids), ectopic (tubal) pregnancy, or endometriosis. Endometriosis is a condition where the inside lining of the uterus (called the endometrium) is found growing on the ovaries, fallopian tubes, or lining of the pelvis. If no other obvious cause for infertility is found before laparoscopy, 60% of women will have endometriosis or pelvic adhesions at this examination even though they have no symptoms. Injection of sterile, colored water through the uterus also allows visualization of patency of the fallopian tubes for infertility. Women with pelvic pain can be evaluated with laparoscopy so that a specific diagnosis can be made.

What is laser or operative laparoscopy? Recent advances have allowed your doctor to not only diagnose problems but to actually treat many conditions at the same time through laparoscopic surgery. The CO₂ laser is a special instrument which generates a highly focused light beam (similar to the sun focused through a magnifying glass) that can be directed down the laparoscope. This laser beam can then be used to vaporize (turn into smoke) areas of endometriosis or pelvic adhesions which are then suctioned out of the abdomen. The laser is an extremely precise and delicate tool for laparoscopic surgery. Other instruments such as a fine scissors, forceps, or cautery needle can also be used through the laparoscope to remove adhesions, ectopic pregnancies, or small tumors. Since the advent of laser laparoscopy, many operations can now be performed through the laparoscope which previously required a major operation with much longer hospital stay recovery period, time off work, etc. About 75% of problems found at laparoscopy can now be treated at the same time and avoid having the patient return at another time for more major surgery. If operative or laser laparoscopy is performed, the operation can take up to two hours or more but you can still go home the same day and recovery is usually quite rapid.

How will I feel after laparoscopy? You should expect to be somewhat sleepy and tired the day of the operation due to the anesthesia medications. You may have mild cramps or discomfort around the incisions for which you will be given a pain medication. Most people feel very good on the day after laparoscopy although some women will still feel uncomfortable or fatigued. We recommend that you not plan to work on the day of laparoscopy or the next day but there are no restrictions on any activity that you feel like doing. Most women are back to work, exercise, and all other activities within 3 days of the procedure. The majority of our patients tell us they are surprised at how easy this operation is and how fast they return to normal activities.

Are there any complications? Minor side effects from laparoscopy include nausea, discomfort, around the incisions, vaginal spotting or light bleeding, and cramps. Major complications are very rare but could include bleeding, infections, damage to the intestines or bladder or other organs, and reactions to anesthetic medications. Operative or laser laparoscopy carries slightly more risk because of the use of more instruments, electric current, etc. but is significantly less dangerous than major surgery. Laparoscopy is generally considered a very safe procedure but must be performed in an operating room setting because of the potential risks. We encourage you to be sure to ask any questions you wish so that you feel comfortable with the decision to undergo this procedure.