

Vaginal Hysterectomy

What is a hysterectomy?

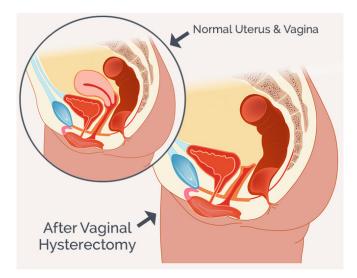
A hysterectomy is an operation that can treat several gynaecological conditions that affect a woman's reproductive system, but primarily, it involves the removal of the uterus.

There are a number of ways that a hysterectomy can be performed, depending on the individual woman's need for the operation and whether some of her reproductive system can be left in place.

Why would I need a hysterectomy?

You would need one if you are experiencing problems with any of the following:

- Heavy, prolonged menstrual bleeding
- Endometriosis
- Fibroids (non-cancerous growths)
- Severe pelvic pain
- Cancer (ovaries, cervix, or uterine)



Types of hysterectomy

There are several different types of hysterectomy that can be performed, depending on the situation:

- Total hysterectomy the most common procedure where the uterus and cervix (the neck of the womb) are completely removed.
- Subtotal hysterectomy only the uterus is removed, leaving the cervix intact.
- Radical hysterectomy (Wertheim's hysterectomy) the womb, cervix, ovaries, fallopian tubes, vagina and lymph glands may be removed.

There are also different approaches to performing a hysterectomy, but they will depend on medical history, or in some cases, personal preference. Your doctor will be able to advise on the best course of action.

In this article we will focus on vaginal hysterectomy, now recognised as being the safest route for hysterectomy and one which offers patients the quickest recovery time.

Vaginal hysterectomy

A vaginal hysterectomy can be performed in a variety of ways; under a general anaesthetic where you'll be unconscious during the procedure, or a local anaesthetic – where you'll be awake, but will not feel any pain, or a spinal anaesthetic – where you'll be numb from the waist down.

During a vaginal hysterectomy, the womb and cervix are removed through a cut that's made in the top of the vagina.

The womb and cervix will be removed using special surgical instruments inserted into the vagina to detach the womb from the ligaments that hold it in place.

After this, the incision will be sewn up, with the whole procedure usually taking about an hour to complete.

This is the safest route and a good choice for the patient, unless there are particular circumstances that rule it out.

Why choose a vaginal hysterectomy?

It is now often preferred over an abdominal hysterectomy because it's much less invasive and recovery time also tends to be quicker.

Usually, the patient can return home the same day, but in some rare cases, may require an overnight stay. Abdominal hysterectomy requires a hospital stay of up to five days and, because it is major surgery, it will also need 6-8 weeks recovery time.

Will it be painful and what happens after the procedure?

There will be some pain and discomfort but you will be offered painkillers to manage this.

As with any invasive procedure there will be dressings covering your wounds, and for vaginal hysterectomy, a gauze pack may be placed inside your vagina to minimise the risk of bleeding (24 hours).

Going to the toilet may also be uncomfortable following treatment.

You will be advised to:

- Take a short walk the day after your operation to help your blood flow normally and reduce the risk of blood clots developing
- Do physiotherapy exercises to improve your mobility
- Practise pelvic floor muscle exercises

You will have a telephone follow up within the first 3 days of your discharge then a follow-up appointment in 6 weeks.



Why choose the Lancashire Gynaecologist?

The Lancashire Gynaecologist, Mr Eric Mutema has pioneered the day case vaginal hysterectomy procedure and is a respected specialist in urogynaecology and vaginal surgery.

If you would like to find out more about his pioneering vaginal hysterectomy treatment, please get in touch. The Lancashire Gynaecologist Practice combines Mr Mutema's expertise in obstetrics and gynaecological care, with excellence in patient-centred care, empathy and consideration for the individual.



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