

# Quick Recovery from Gynaecological Treatments

In recent years, minimally invasive surgery (MIS), also known as laparoscopic or keyhole surgery, has become common clinical practice in many countries because of its benefits as compared to traditional open surgery. It allows patients to recover and return to normal life more rapidly, giving women, especially those who are in the workforce, a shorter downtime. Dr Irene Chua, an Obstetrician & Gynaecologist from Gleneagles Hospital offers you an insight into how this procedure can make a difference in women's lives.



Women who have had a myomectomy may sometimes run the risk of scar rupture during labour. Dr Chua explains: "Not all women can achieve normal vaginal delivery post myomectomy. This is due to various factors including the size and location of the fibroids, the site of incisions on the womb to remove the fibroids and the way the defect had been stitched."

Emily had another child a few years later, also delivered normally via the vaginal route. But she subsequently developed a large ovarian cyst a few years later and went back to Dr Chua for consultation. Emily underwent a cystectomy where her abnormal cyst was removed and both ovaries were preserved.

Women in the older age group who have gone through such procedures gain relief from their menstrual issues and avoid the risk of hysterectomy (removal of the uterus). MIS myomectomy generally requires a one to two night stay in hospital with rapid return to mobility after discharge. Dr Chua shares, "Another of my patients, who had an 8cm fibroid removed, went for a salsa dance performance as a performer, just one week after her surgery!"

**Endometriosis** is a highly debilitating disease that affects mainly women of childbearing age, characterised by pelvic pain, dysmenorrhoea, painful defecation and infertility. Dr Chua explains that MIS surgery for endometriosis needs to be performed by laparoscopic gynaecologists with advanced skills to remove the deeply infiltrating disease and at times, colorectal surgeons and urologists may have to be involved for total clearance.

MIS is the treatment of choice in gynaecological cancers, especially during the early endometrial and cervical cancers. However, for ovarian cancers and advanced gynaecological cancers, more data is needed to define the role of MIS to treat such conditions. MIS uses advanced optics and instruments, providing superior visualisation of pelvic organs and indirectly enhances the safety of such surgeries, thereby reducing surgical complications.

Studies have shown that MIS improves surgical outcomes as well as cosmetic results. According to Dr Irene Chua, MIS is now considered the standard treatment for many benign and some malignant gynaecological conditions. It is also a common choice for ectopic pregnancy, ovarian cysts, uterine fibroids, and endometriosis.

## Ectopic Pregnancy

An ectopic pregnancy is an abnormal pregnancy that occurs outside the womb (uterus). A small proportion of such cases can be treated conservatively either with medical injection or with close monitoring of blood hormone levels. The majority of patients with this condition may require immediate surgical intervention such as removal of the abnormal pregnancy or the affected tube. 99 per cent of these are now performed laparoscopically, giving patients less post-operative pain, early recovery, reduced length of hospital stay and a rapid return to normal activity.

## Ovarian Cysts

Ovarian cysts are somewhat common, and tend to occur during a woman's childbearing years. They come in a variety of different sizes and their contents can include clear fluid, blood, mucous, oil or pus. At times they may even contain one or two teeth, strands of hair, skin tissue or cancerous cells. Assessment by your gynaecologist to decide the feasibility and safety of using the MIS approach is important. Generally, benign cysts of less than 15cm can be safely removed laparoscopically. This procedure can be done in the day surgery setting or as an inpatient with a one night hospital stay.

Patients with cysts bigger than 15cm or those with ultrasound scan features of possible cancerous changes should be advised for open surgery. "Currently about 70 to 80 per cent of ovarian cysts can be removed by minimally invasive surgery," says Dr Chua.

## Uterine Fibroids

These are non-cancerous growths in the uterus which may cause heavy menses, pain, infertility or pressure symptoms on the bladder or bowel.

MIS removal of fibroids (myomectomy) can be done for women who are keen to keep their womb or have children. Fibroids of up to 10cm can be removed laparoscopically. The complexity of myomectomy depends on the location as well as the number of fibroids to be removed. Fibroids that are located within the lining of the womb can be removed hysteroscopically (vaginally) without requiring any incisions on the abdomen.

Dr Chua says that many young women who have undergone laparoscopic or hysteroscopic removal of fibroids have proceeded to conceive and deliver healthy babies. In fact, one of her patients, Emily had a large 10cm fibroid which caused her to have very heavy periods when she was in her late 20s. Options of both open and keyhole surgery were discussed and Emily elected for laparoscopic myomectomy which she eventually recovered well from. She subsequently conceived about half a year later, had a smooth pregnancy, and gave birth to a healthy baby through normal vaginal delivery.

**For more information or an appointment, please call our 24-Hour Helpline at 6735 5000.**

## ParkwayHealth Patient Assistance Centre

**24-Hour Helpline: 6735 5000**

Email: [ppac@parkway.sg](mailto:ppac@parkway.sg) • Websites: [www.ppac.sg](http://www.ppac.sg) | [www.womenandchildren.sg](http://www.womenandchildren.sg)

Connect with us at:  
 [facebook.com/parkwayhealth](https://www.facebook.com/parkwayhealth)

Free download from  
 **App Store**  
HealthMatters

 Gleneagles Hospital •  Mount Elizabeth Hospital •  Parkway East Hospital