Center for Minimal Access Surgery in Gynaecology

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Tips & Tricks Part III Ectopic fibroids after Morcellation

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Hysterectomy Masterclass ESI Hamburg 17th to 18th April 2013



Trips & Tricks

Part I Hysterectomy the big and the difficult uterus

Part II Myomectomy no limits?

Part III Ectopic fibroids
Problems due to morcellation

Hazards of morcellation: myoma remnants, endometriosis and malignancy

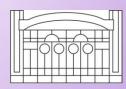
A.Salfelder

A.Gallinat, C.P. Möller, W. Nugent, E. Krueger, A. Nugent, P. Biel,

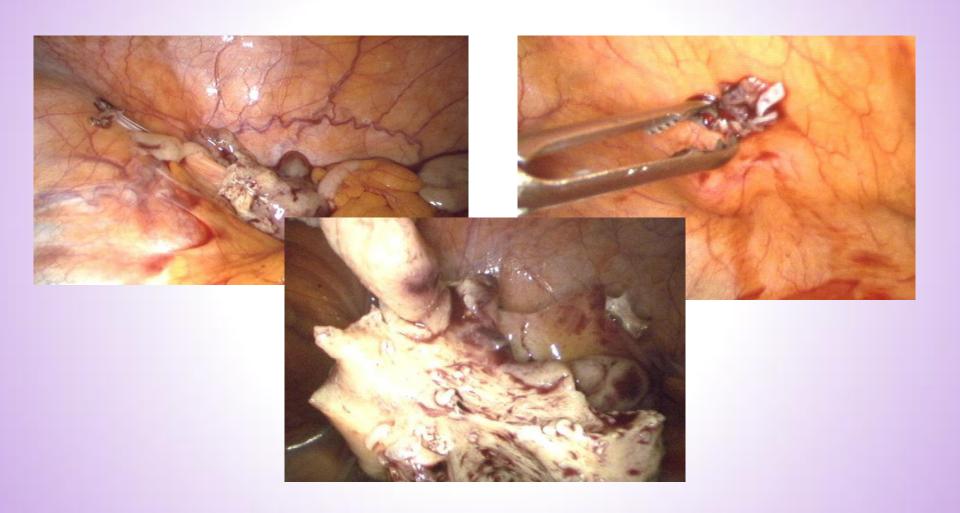
S. Jürgens, O. Buchweitz, C. Bormann

TAGESKLINIK ALTONAER STRASSE,

Center of Gynaecological Endoscopy, Hamburg, Germany



Hazards of Morcellation: Myoma Remnants, Endometriosis and Malignancy



Center of Gynaecological endoscopy, Hamburg, Germany

Hazards of Morcellation: Myoma Remnants, Endometriosis and Malignancy

Five case reports:

- 2 cases of myoma remnants (port-site, peritoneal cavity)
 10 months and 5 years after LSH
- ➤ 1 case of myoma remnants in the peritoneal cavity 6 years after laparoscopic myomectomy
- ➤ 1 case of an endometriotic nodule located in the right port-site 6 weeks after LSH
- ➤ 1 case of an unexpected leiomyosarcoma after morcellation and LSH

Ectopic fibroids after laparoscopy n = 17

Literature

Laparoscopic subtotal hysterectomy (10)

Donnez*) (2007) Hilger (2006) Hutchins (1998)

Laparoscopic myomectomy (6)

Paul (2006) Takeda (2007) Epstein (2009) Kumar (2008) Leung (2009) Miyake (2009)

Laparoscopic total hysterectomy (1)

La Coursiere et al.(2005)

*) 8/1405 LASH (0.57%) nach 2-9 Jahren, 2-8 cm, histologisch Adenomyosis



Geburtsh Frauenheilk 2009; 69: 940-944



12 reported cases of ectopic fibroids after morcellation

- 8 Myomectomy, 2 SLH, 1 VH
- 7 (own clinic) + 5 (other clinics)
- 1 Implantation endometrial sarcoma of the stroma
- 1 Implantation leiomyosarcoma









Estimated number of unreported cases:

≥ 5000 morcellement

3100 laparoscopic hysterectomies

3600 laparoscopic myomectomy

Morice P et al. (2003)

Prognostic value of initial surgical procedure for patients with uterine sarcoma: analysis of 123 patients (34 with morcellation)

Recurrence rate after 3 months in the morcellation group was higher (8,82 vs. 3,66%). No difference after 10 months.

Einstein et al (2008)

... 17 Patients underwent supercervical hysterectomy or uterine morcellation for presumed benign uterine disease (88% Stage I, 12% Stage II). 2/13 were upstaged by secondary surgery (LMS). 10/11 patients whose stage was confirmed by secondary surgery remained disease free. None of the patients ... without morcellation were upstaged.

Patients who undergo completation surgery with restaging and are not upstaged appear to have a good prognosis.

Hazards of Morcellation: Myoma Remnants, Endometriosis and Malignancy

Conclusion

Careful attention must be paid
during and after morcellation
in order to ensure that even small pieces
of myoma and endometrium
have been removed. Unprotected removal of
myoma pieces should be avoided.

Before surgery: define the risks – in case of

suspekt Fibroids: MRT!

(rapid growth, structure, pain)

Morcellement: adequate morcellator + handling

(sharp, adequate size, tangential cutting)

Rinsing: abdominal cleaning/rinsing topdown

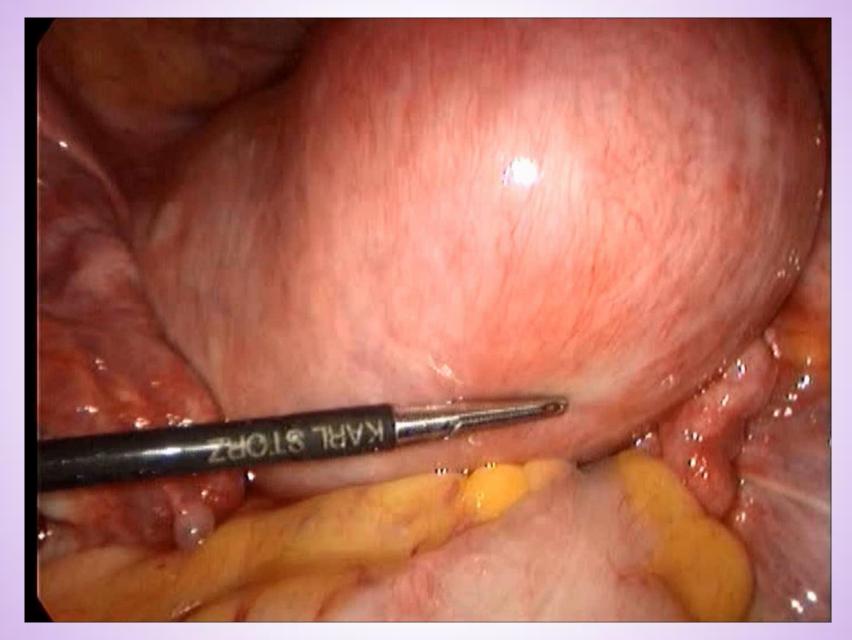
(including the trocar!)

Malignancy: Second look laparoscopy after 3-6 month

(if necessary peritoneal debulking)

Ectopic fibroids

Prevention



The end



Thank you!