

**Center for
minimal access
Surgery in Gynecology**
**Department of
Gynecology and Obstetrics**

**Hospital Sachsenhausen
Frankfurt**
**Academic teaching hospital
University of Frankfurt**



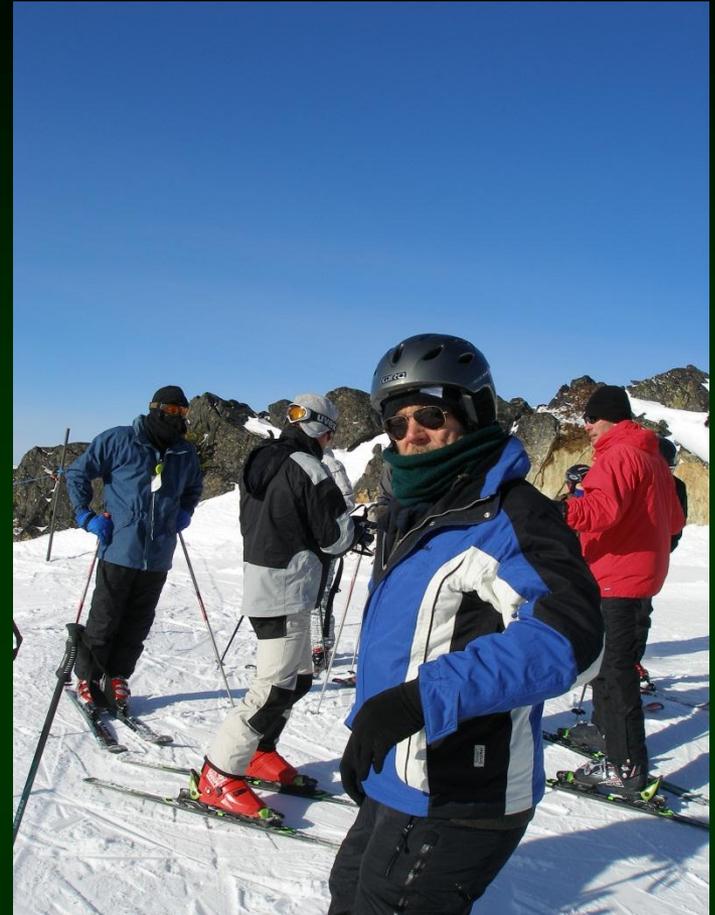
Gynecological Laparoscopic Surgery

Philipp-Andreas Hessler

Laparoscopy Training Course
Harare Zimbabwe 14th - 18th March 2011



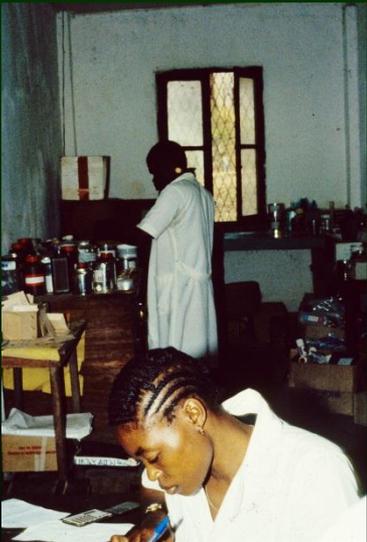
24 hours ago ...



3 days ago ...



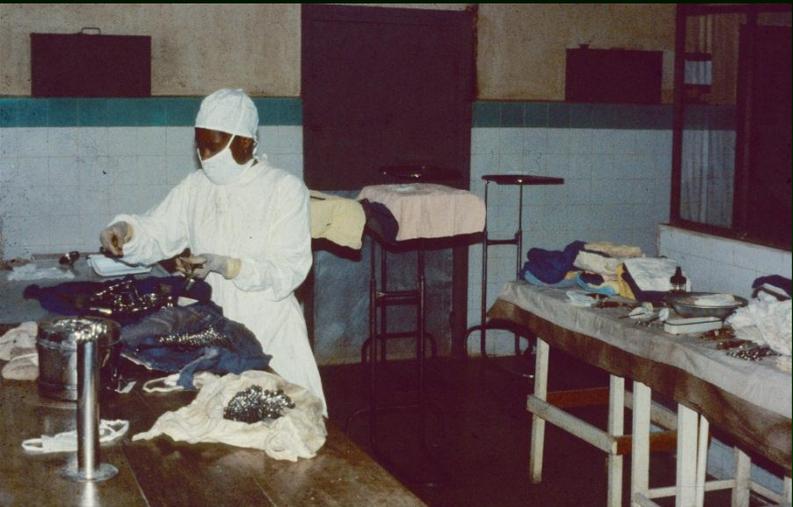
...but 23 years ago !



Cameroon 1983-1987



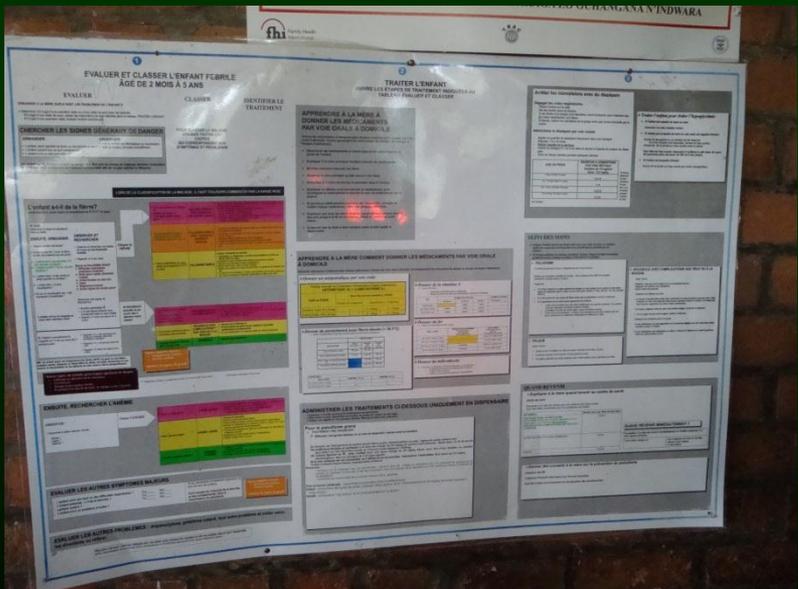
...but 23 years ago !



...but 23 years ago !



...but 2 years ago !



Ruanda 2009

**90 % of standard
gynecological surgery
can nowadays be done
by laparoscopy !**

**.. even a lot of
gynecological
cancer surgery
can nowadays be done
by laparoscopy**



Cases of endoscopic surgery overall > 20000

Hysteroscopy 9000

Myomectomy 1200

Endometrial Ablation 900

Uterine septum 200

other 800

Laparoscopy 11000

Total laparoscopic hysterectomy 2200

Subtotal laparoscopic hysterectomy 800

Myomectomy 2500

Adnexal surgery 3000

Lymphonodectomy 250



Introducing laparoscopic surgery in african Gynecology

Germany

Africa

- Laparoscopic cancer surgery (Wertheim)
- Laparoscopic surgery of deep infiltrating endometriosis
- Laparoscopic surgery of descensus or prolaps
- Laparoscopic total hysterectomy
- Laparoscopic subtotal hysterectomy
- Laparoscopic myomectomy
- Laparoscopic adnexal surgery
- Laparoscopic sterilisation
- Laparoscopic diagnostics



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- Laparoscopic sterilisation
- Laparoscopic diagnostics



Disadvantages of laparoscopic surgery

Technical/financial aspects:

- High costs of aquisition
- Electric supply, CO₂ gas
- Damageable instruments
- Technical support of the medical industry

Medical aspects:

- No spinal anaesthesia possible
(sometimes local anaesthesie)
- Intensive and extensive training for all
- Very long learning curve



Technical/financial aspects:

- Fast recovery
- Low morbidity
- Less hospitalisation costs
- Low running costs
- Low personal costs

Medical aspects:

- Overall view of abdomen
- Microscopic preparation

Accept the fact that nowadays everything is possible laparoscopically !



Advantages of laparoscopic surgery



abdominal hysterectomy



vaginal hysterectomy



laparoscopic hysterectomy



Laparoscopic surgery in gynecology

We will not talk about:

- **Diagnostics**
- **Indications**
- **Choice of surgical treatment**

Because:

- **Laparoscopic surgery is (only) minimal access surgery**



Implementation of laparoscopic surgery in Zimbabwe

**What may be theoretically possible
is not always practicable!**

Long term project:

- **What are your medical needs ?**
- **What are your structural conditions ?**
- **Where is it reasonable to introduce laparoscopy ?**
- **Gradually ?**
- **periphery ⇒ referral hospital (sub-center) ⇒ center**

Long term issue:

- **Laparoscopy is finally cheaper**
- **Laparoscopy is definitely safer (HIV)**



Video session



20 year ago:

Minimal invasive surgery had a very defensive position – „we are as good as open acces surgery“

Today:

We can proudly argue that „we are even better than open acces surgery“ because due to the better view inside the abominal cavity our surgical diessection is more accurate and safe (ureter, bowel, vessels and bladder)



**Thank you
for your
attention !**

