

**Indications**

Indications for this operation are bothersome discomfort affecting patient's activity of daily living, adverse effect on bowel or urinary function, failed non-surgical treatment

**The Operation**

1. General / regional anaesthesia.
2. Vaginal incision.
3. Uterus removed vaginally.
4. Trimming of vaginal tissue if necessary.
5. Pelvic floor supporting tissue/ligament strengthened.
6. A plastic tube (catheter) may be left to drain urine in the bladder after the operation.
7. All tissues removed will be sent to the department of pathology or disposed of as appropriate unless otherwise specified.
8. Other associated procedures which may become necessary during the operation like blood transfusion, surgery for co-existing stress urinary incontinence.
9. Photograph / video may be recorded during the operation for education / research / documentation purpose. Please inform staff if you have any objection.

**Preoperative Preparation**

1. Admit 1 day before or on same day of this "elective" operation.
2. Anaesthetic assessment. **Inform your doctors** about drug allergy, regular medications or other medical conditions.
3. Keep fast for 6 to 8 hours before operation.
4. Empty bladder and change to operation clothes before transfer to operating room.
5. Pre-medication, antibiotic prophylaxis and intravenous line may be required.

**Postoperative Instruction****General**

1. Mild throat discomfort or pain because of intubation.
2. Mild discomfort or pain over the operation site. Inform nurses if more analgesics are required.
3. Nausea or vomiting are common; inform nurses if symptoms severe.
4. Can mobilize and get out of bed 6 hours after operation, and go home on day 2.

**Diet**

Resume diet usually 4 hours after anaesthesia when taking sips of water well.

**Common Risks and Complications** (not all possible complications are listed)**Anesthesia related complications**

1. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism.
2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
3. Allergic reaction and shock.

**Procedure related complications**

1. Bleeding, may need blood transfusion (2% chance).
2. Injury to adjacent organs especially the bladder, ureters and bowel, may require repair.
3. Pelvic infection.
4. Postoperative voiding difficulty.
5. Dyspareunia especially if posterior repair performed.
6. Laparotomy may be required if vaginal procedure fails.
7. May develop or unmask stress incontinence.
8. Possible recurrent pelvic organ prolapse, requiring re-operation (up to 30% after prior prolapse repair).

**Risk of Not Having the Procedure**

Progression and deterioration of disease condition that affect quality of life.

**Alternative Treatment**

Observe or non-surgical treatment using pessary.

**Things to take note on discharge**

1. Resume daily activity gradually, taking analgesics prescribed by your doctor if required.
2. Loss of reproductive and menstrual function for woman in reproductive age if uterus removed.
3. Avoid intercourse for 6 weeks or until examination by medical staff at follow up.

**Remarks**

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

**Reference**

Hospital Authority : "Information Sheet of Laparoscopic Assisted Vaginal Hysterectomy (Lvh) / Total Laparoscopic Hysterectomy (Tlh) With/Without Bilateral Salpingectomy/ Salpingo-Oophorectomy"( 2021)  
[https://www.ekg.org.hk/pilic/public/O&G\\_PILIC/O&G\\_LaparoscopicAssistedVaginalHysterectomyLvhTotalLaparoscopic%20HysterectomyTlh+-BilateralSalpingectomySalpingoOophorectomy\\_0318\\_eng.pdf](https://www.ekg.org.hk/pilic/public/O&G_PILIC/O&G_LaparoscopicAssistedVaginalHysterectomyLvhTotalLaparoscopic%20HysterectomyTlh+-BilateralSalpingectomySalpingoOophorectomy_0318_eng.pdf)  
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