Primary Pelvic Floor Repair With Laparoscopic Supracervical Hysterectomy

Laparoscopic Supracervical Hysterectomy (LSH) is a common advanced laparoscopic procedure offered as treatment for a number of gynecologic problems. Ideas vary among surgeons regarding optimal closing techniques of the cervix and pelvic floor. Many advocate no closure at all. Another consideration with LSH is adjunctive treatment of uterine prolapse either identified preoperatively, or noted with hypermobility in the post-LSH cervix at surgery.

In this video, I am demonstrating a technique for primary cervix and pelvic floor closure. In addition, I show a simple technique of uterosacral reattachment or plication for support of the residual post-LSH cervix and vaginal vault. This can be done with or without robotic technique. It can be done with total hysterectomy as well. This video uses the daVinci-S robotic technology with the advantages of improved instrument dexterity and visualization. I use sharp dissection and intermittent pulsed radio-surgical desiccation.

The purpose primary pelvic floor repair and uterosacral plication is to enhance apical pelvic floor support, increase or maintain vaginal length and provide peritoneal closure for reduced adhesions.

After over 150 cases, my experience has been very favorable outcomes and no major complications. A few patients have been evaluated with repeat laparoscopic procedures by the author and no significant adhesions have been noted. Favorable post-op objective and subjective findings regarding pain, bladder, bowel and sexual function are comparable to other laparoscopic procedures. Uterosacral plication or reattachment adds a measurable improvement in post LSH vaginal length and apical support. Most importantly, patient satisfaction scores are high with this procedure.

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