



## **Hysterectomy**

### **What is a Hysterectomy?**

A hysterectomy is an operation in which the uterus is removed. Depending on the case, the cervix, ovaries and/or Fallopian tubes might also be removed

### **Why is This Operation Done?**

A hysterectomy is performed to relieve different pain and/or discomfort from illnesses or diseases. Hysterectomy has long been considered the first and only solution for treating individuals with a vagina, who have certain gynaecological problems. However, there may be other options available.

### **Does it Cost Money?**

In Canada hysterectomy procedures are covered by provincial healthcare. However, most individuals experience wage losses due to taking time off to have the procedure.

### **Complications That May Lead to a Hysterectomy:**

- Fibroids
- Endometriosis
- Adenomyosis
- Pelvic inflammatory disease
  - Heavy periods
  - Prolapse of the uterus
    - Cancer

### **Types of Procedures:**

#### ***Abdominal Hysterectomy:***

An incision is made through the abdominal wall, usually above the pubic bone, similar to the incision

made for a caesarean section. This allows physicians the greatest access to the reproductive structures and is normally done for removal of the entire reproductive complex. An open hysterectomy provides the most effective way to explore the abdominal cavity and perform complicated surgeries.

### ***Recovery:***

The recovery time for an open hysterectomy is 4–6 weeks and sometimes longer due to the need to cut through the abdominal wall. Most individuals go home 2-3 days after this surgery. You should not be doing anything physical until you talk with your doctor about restrictions. Walking is encouraged, but not lifting. After 6 weeks, you can get back to your regular activities, including having sex.

### ***Vaginal Hysterectomy:***

A vaginal hysterectomy is performed entirely through the vaginal canal and has fewer complications, shorter hospital stays and shorter healing time. During a vaginal hysterectomy the uterus is removed through the vagina.

### ***Laparoscopic-assisted Vaginal Hysterectomy:***

Laparoscopically assisted vaginal hysterectomy (LAVH) is a surgical procedure using a laparoscope to guide the removal of the uterus and/or Fallopian tubes and ovaries through the vagina.

Several small incisions are made in the abdominal wall to provide a passage for the laparoscope and other microsurgical tools. The laparoscope acts as a tiny telescope. A camera attached to it provides a continuous image that is magnified and projected onto a television screen for viewing.

After detaching the uterus (tubes, ovaries, etc.) using the laparoscopic tools, the organs are then removed through an incision made in the vagina.

### ***Laparoscopic-assisted Supra-cervical Hysterectomy:***

With a "laparoscopic-assisted supra-cervical hysterectomy" (LASH), the surgeon removes the uterus and leaves the cervix in place. A surgical tool cuts the uterus into small pieces that can be removed from the abdominal cavity via the laparoscopic ports.

### ***Total Laparoscopic Hysterectomy:***

A total laparoscopic hysterectomy is performed solely through the laparoscopes in the abdomen. The entire uterus is disconnected using long thin instruments. All tissue to be removed is passed through the small abdominal incisions.

### ***Robotic Hysterectomy:***

The surgeon's movements are mimicked by robotic arms that make small incisions to remove the uterus. Most individuals come home the next day. If the cervix is removed, you will have the same restrictions as you would have for a LAVH.

### **Recovery (for all non-abdominal procedures):**

This procedure is not as invasive and can have a recovery period as short as six days to two weeks.

Walking is encouraged, but not heavy lifting. You will need to abstain from sex until after 6 weeks.

**If have any of these symptoms, immediately contact your doctor:**

- Fever or chills
- Heavy bleeding or unusual vaginal discharge
  - Severe pain
- Redness or discharge from incisions
- Problems urinating or having a bowel movement
  - Shortness of breath or chest pain

**SELF CARE ADVICE**

For most individuals, life without a uterus means relief from the symptoms that caused them to have a hysterectomy -- bleeding, pelvic pain, and abdominal bloating. With relief from those symptoms, individuals may have better sex -- with greater libido, frequency, and enjoyment.

If the ovaries were removed, there are a few more challenges ahead. If you had not gone through menopause before your hysterectomy, you probably will begin having symptoms of menopause -- hot flashes and mood swings. Your body is adjusting to changes in hormone levels. You may also have some changes in sexual desire and enjoyment, and vaginal dryness. Most individuals begin hormone replacement therapy before they leave the hospital, because bodily changes can be so drastic.

You may feel a sense of loss. You may grieve over the loss of your uterus and your inability to have children. You may have questions regarding sexuality, or gender. Regardless of the type of problems encountered, meeting with a sexologist or therapist, with your partner or alone, can help you reactivate and take back your sexuality. If you had surgery because of illness or cancer, you may feel depressed.

**These feelings are normal!** Talk to your doctor and a mental health therapist about them. Most individuals, however, are happy after their hysterectomy.

**Medication:** During and after these procedures, you may be prescribed painkillers, antibiotics and antidepressants.

**Sexual Health Questions? We Have Answers!**

**Location:**

47 St. Clare Avenue, St. John's, NL, A1C 5H2

**Hours:**

Monday: 9am – 4:30pm

Tuesday: 9am – 4:30pm

Wednesday: 9am – 4:30pm

Thursday: 12pm – 6:00pm

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