

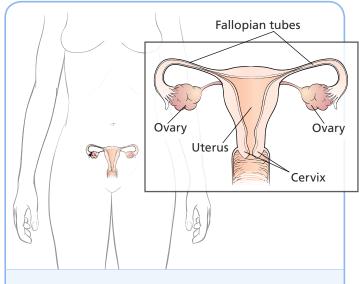
Hysterectomy

What is a hysterectomy and why do I need it?

A **hysterectomy** [his-tuh-REK-tuh-mee] is a surgery to remove all or part of the uterus (womb). Your healthcare provider may recommend a hysterectomy to treat a medical problem with your uterus. Possible problems include:

- Muscular growths in the uterus, called uterine fibroids
- Cancer
- Pelvic support problems (such as when the uterus slides down into the vagina)
- Abnormal bleeding from the uterus
- Chronic pelvic pain
- Uterine tissue growing outside the uterus, called endometriosis [en-doh-mee-tree-OH-sis]

Hysterectomy is a major surgery. Your healthcare provider may suggest this only after other treatments have failed to correct the problem.



A hysterectomy is a surgery to remove all or part of the uterus (womb). It is one of the most common major surgeries for women. After a hysterectomy, a woman cannot become pregnant.

Talking with your healthcare provider about hysterectomy

The table below lists the most common potential benefits, risks, and alternatives for this procedure. Other benefits and risks may apply in your unique medical situation. Talking with your healthcare provider is the most important part of learning about these risks and benefits. Be sure to ask any questions you may have.

Potential benefits	Risks and potential complications	Alternatives
The benefits of hysterectomy depend on the condition you are being treated for. Generally hysterectomy can: • Remove abnormal or unwanted tissue • Stop heavy uterine bleeding and discomfort • Improve pelvic support problems	 Blood clots in the legs or lungs Infection Bleeding during or after surgery, which may require a blood transfusion Bowel injury or blockage Injury to the bladder, urinary tract, or nearby organs Problems related to anesthesia Death (extremely rare) Note that generally speaking, abdominal hysterectomy requires a longer recovery period than does laparoscopic or vaginal hysterectomy (see page 2). 	Alternatives to hysterectomy depend on the reason you are having the procedure and on what other treatments you've tried. Ask your healthcare provider for alternatives for your specific situation.

How is it done?

Hysterectomy can be done in several different ways:

- Laparoscopic hysterectomy (laparoscopy)
 [lap-uh-ROS-kuh-pee]. This is surgery done through
 small incisions (cuts) in the abdomen (belly). The
 surgeon is guided by a tiny lighted camera, called
 a laparoscope [LAP-er-uh-skohp], which is passed
 through an incision.
- Vaginal hysterectomy. This is surgery done through a cut in the vagina. The surgeon passes tools though the cut and removes the uterus. Sometimes, the surgeon will combine this surgery with laparoscopy. The laparoscope sends a picture of the site to a screen to guide the surgeon.
- Abdominal hysterectomy (laparotomy)
 [lap-uh-ROT-uh-mee]. This is "open" surgery. The
 surgeon reaches the uterus through an larger cut
 in the skin and tissue of the lower part of the belly.
 The cut is usually about 5 inches long, similar to a
 C-section incision.

How do I prepare?

You can prepare for surgery by:

- Reviewing your surgeon's instructions. Your surgeon will tell you when to stop eating and drinking before your surgery. If you don't follow these instructions, it may not be safe to give you anesthesia and your surgery may have to be moved to another day.
- Making a list of all the medicines you are taking and bringing it with you. Include all prescriptions, over-the-counter medicines (such as cough syrup or allergy pills), inhalers, patches, vitamins, and herbal remedies.
- Cleaning your skin. You may be asked to wash your skin with a special germ-fighting solution.

What can I expect after surgery?

You will remain at the hospital for several hours after your surgery. During that time, your medical team will work to:

- Prevent blood clots by:
 - Helping you to walk as soon as possible
 - Massaging your legs by inflating and deflating a compression wrap
 - Giving injections of blood thinners
- Manage your pain and bleeding by:
 - Giving you medicine to control your pain.
 - Using sanitary pads and gauze to control any vaginal discharge.
 - Teaching you how to care for yourself at home. Ask your care team for a copy of the Intermountain fact sheet <u>Hysterectomy: Home</u> <u>Instructions</u> to take with you when you leave.



Most people go home the same day. In some cases, you may need to stay in the hospital for one or more days. (Abdominal surgery requires a longer hospital stay then laparoscopic or vaginal hysterectomy.)

My follow-up appointment	
Date/Time:	
Place:	
Healthcare provider:	