

## INTERESTING CASE

# Big Fibroid (20 cms Intramural) removed Laparoscopically successfully

-Dr. Pragnesh Shah

Fibroid is the one of the common problems in female and Myomectomy is one the most common endoscopic surgery performed today. But this was a unique case of a VERY BIG INTRAMURAL FIBROID removed laparoscopically.

### Unique features:

- \* Nulliparous patient willing to conceive in future
- \* Not ready to sacrifice an organ of the body till possible
- \* Working at a high post willing to recover as fast as possible
- \* Staying at London, willing to come to India only for the operation
- \* Patient consulted big and famous tertiary Gynaec care hospitals in London, they advised her HYSTERECTOMY and advised her NOT to try Endoscopy otherwise she will end up in a mess!

### Why pt. chose India for her operation?

- \* We showed our confidence
- \* We showed our experience
- \* We promised to give video of laparoscopic surgery to the patient meaning thereby transparency

### Investigations done

- \* Routine pre op investigations
- \* USG at many places
- \* MRI at London
- \* Surgery performed
- \* Laparoscopic Myomectomy operation

It was a 20 cm. big fibroid. Uterus was much above umbilicus (approx. 30 wks pregnancy size) and there were many technical difficulties!

Important Key steps of used in this surgery

- (1) Primary entry through Palmer's point
- (2) Supra-umbilical 10 mm port under guidance of Palmer's point
- (3) Bladder peritoneum dissected
- (4) **Both uterine vessels exposed & ligated to reduce vascularity With No. 1 Vicryl and Fibroid uterus was blanched (devascularised)**



- (5) **In situ Morcellation started from Fundus & half of the fibroid morcellated in situ**
- (6) Remaining fibroid separated from the uterus & removed as usual
- (7) **Adequate suturing of myometrial defect with multiple figures of '8' stitches done to obliterate huge dead space.**

### Learning points

- \* It requires unique skill,
- \* A lot of experience and expertise,
- \* A lot of instruments and equipments,
- \* A lot of setup and team.

The surgery was very successfully completed without any complications and patient could recover just like any other routine endoscopic surgeries.

The weight of tumor was 1.6 kgs. She was operated on 15th December, 2007 & discharged on 17th December, 2007 with taking normal diet and doing normal activities and participated in press conference on 19th December.

Last but not least, at a very very low cost compared to other countries.

With the internet facility available every where, patients get a very fast & reliable information. Patient trust the doctors by seeing operative videos of her own and video can help us in conveying our operative skills.

Patient Mrs. Rashmikaben has willingly agreed to communicate with any one including any patient suffering from big fibroids. She says "I was denied the chance of preserving my uterus in London, I trusted Indian doctors, my fibroid is removed and uterus is preserved, I am going home just after 48 hours of surgery! I can't believe this !