

# Considering Endometriosis Surgery?

Learn about minimally invasive  
**da Vinci<sup>®</sup> Surgery**



**da Vinci<sup>®</sup> Surgery**

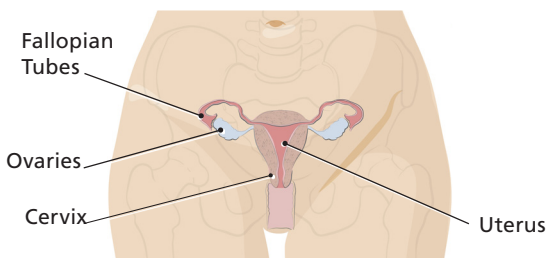
# The Condition:

## Endometriosis

Endometriosis is a condition in which the tissue that lines your uterus (the endometrium) also grows outside of your uterus. This tissue is called implants or lesions, and is usually found in your pelvic area. In rare cases, it can grow in other parts of your body. Normally, the endometrium sheds each month during your period, but implants stay in place.

Endometriosis is usually diagnosed between ages 25 to 35 but can occur anytime during a woman's reproductive years, from menstruation through menopause.<sup>1</sup> Endometriosis is very common and family history plays an important role. A woman who has a mother or sister with endometriosis is six times more likely to develop the condition.<sup>1</sup>

Many women have no symptoms, but endometrial implants can cause irregular bleeding, infertility and pain.<sup>1</sup> Mild to severe pain is the most common symptom, which may include pain during periods, intercourse, bowel movements, and pain in the lower back or abdomen.



## Treatment & Surgical Options:

Depending on how severe your symptoms are, treatment may include lifestyle changes, medication to control pain, and medication to control endometriosis growth. If your symptoms get worse or are not eased by medical treatment, your doctor may recommend surgery.<sup>1</sup>

There are two common surgical options: endometriosis resection and hysterectomy. Endometriosis resection involves removing all visible implants while leaving the uterus and other organs in place. Endometriosis resection is usually recommended for women who want to get pregnant in the future. Hysterectomy involves removing the uterus and possibly other affected organs. It is recommended for women who are not planning a future pregnancy.

If you decide that endometriosis resection is the best surgical option based on your condition and symptoms, the following information about the procedure may be helpful.

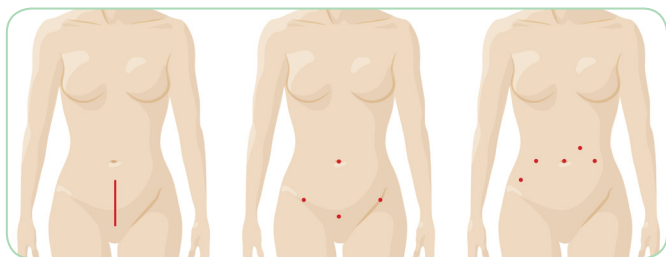
Endometriosis resection can be performed using traditional open surgery or minimally invasive surgery (laparoscopy).



With open surgery, a large incision is made in your abdomen – large enough for your surgeon to fit his/her hands inside your body. Open surgery allows doctors to see and touch your organs as they operate. It may be recommended when pelvic organs such as the bowel are affected.

Laparoscopic surgery is minimally invasive – meaning surgeons operate through a few small incisions. During traditional laparoscopy, long-handled surgical instruments are inserted through the incisions along with a tiny camera. The camera takes images inside your body and sends them to a video monitor in the operating room to guide surgeons as they operate.

There is another minimally invasive surgical option for women diagnosed with endometriosis - *da Vinci* Surgery.



Open Surgery  
Incision

Laparoscopy  
Incisions

*da Vinci* Surgery  
Incisions



# *da Vinci* Surgery:

## A Minimally Invasive Surgical Option

If your doctor recommends surgery to remove endometrial implants / uterine lining, you may be a candidate for minimally invasive *da Vinci* Endometriosis Resection.

With the *da Vinci* Surgical System, your doctor operates through a few small incisions - similar to traditional laparoscopy. The *da Vinci* System features a magnified 3D high-definition vision system and tiny wristed instruments that bend and rotate far greater than the human wrist. These features enable your surgeon to operate with enhanced vision, precision, dexterity and control.

As a result of *da Vinci* technology, *da Vinci* Endometriosis Resection offers the following potential benefits which are similar to those offered by traditional laparoscopy:

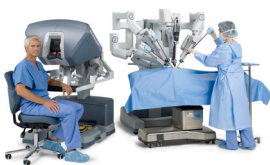
- › Low blood loss<sup>2</sup>
- › Low conversion rate to open surgery<sup>2</sup>
- › Low rate of complications<sup>2</sup>
- › Short hospital stay<sup>2</sup>
- › Small incisions for minimal scarring

### **Risks & Considerations Related to Endometriosis Resection & *da Vinci* Surgery:**

Potential risks of any endometriosis resection procedure include:

- Bladder injury
- Abscess
- Urinary tract injury
- Bowel obstruction

In addition to the above risks, there are risks related to minimally invasive surgery, including *da Vinci* Surgery for endometriosis resection, such as hernia (bulging tissue at incision site) and pulmonary embolism (blocked lung artery).<sup>2</sup>



## **Important Information for Patients:**

All surgery presents risk, including *da Vinci* Surgery. Results, including cosmetic results, may vary. Serious complications may occur in any surgery, up to and including death. Examples of serious and life-threatening complications, which may require hospitalization, include injury to tissues or organs; bleeding; infection, and internal scarring that can cause long-lasting dysfunction or pain. Temporary pain or nerve injury has been linked to the inverted position often used during abdominal and pelvic surgery. Patients should understand that risks of surgery include potential for human error and potential for equipment failure. Risks specific to minimally invasive surgery may include: a longer operative time; the need to convert the procedure to other surgical techniques; the need for additional or larger incision sites; a longer operation or longer time under anesthesia than your surgeon originally predicts. Converting the procedure to open could mean a longer operative time, long time under anesthesia, and could lead to increased complications. Research suggests that there may be an increased risk of incision-site hernia with single-incision surgery. Patients who bleed easily, have abnormal blood clotting, are pregnant or morbidly obese are typically not candidates for minimally invasive surgery, including *da Vinci* Surgery. Other surgical approaches are available. Patients should review the risks associated with all surgical approaches. They should talk to their doctors about their surgical experience and to decide if *da Vinci* is right for them. For more complete information on surgical risks, safety and indications for use, please refer to <http://www.davincisurgery.com/safety>.

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Your doctor is one of a growing number of surgeons worldwide offering *da Vinci*<sup>®</sup> Surgery.

For more information and to find a *da Vinci* surgeon near you, visit:  
[www.daVinciSurgery.com](http://www.daVinciSurgery.com)

<sup>1</sup> National Institutes of Health. Available from: [www.nlm.nih.gov/medlineplus/ency/article/000915.htm](http://www.nlm.nih.gov/medlineplus/ency/article/000915.htm). <sup>2</sup>Nezhat C, Lewis M, Kotikela S, Veeraswamy A, Saadat L, Hajhosseini B, Nezhat C. Robotic versus standard laparoscopy for the treatment of endometriosis. *Fertil Steril*. 2010 Dec;94(7):2758-60. Epub 2010 May 26

## The Enabling Technology: *da Vinci* Surgical System

The *da Vinci* Surgical System is designed to provide surgeons with enhanced capabilities, including high-definition 3D vision and a magnified view. Your doctor controls the *da Vinci* System, which translates his or her hand movements into smaller, more precise movements of tiny instruments inside your body.



Though it is often called a “robot,” *da Vinci* cannot act on its own. Surgery is performed entirely by your doctor. Together, *da Vinci* technology allows your doctor to perform routine and complex procedures through just a few small openings, similar to traditional laparoscopy.

The *da Vinci* System has been used successfully worldwide in approximately 1.5 million various surgical procedures to date. *da Vinci* - changing the experience of surgery for people around the world.