

# Considering Hysterectomy?

Learn about minimally invasive  
*da Vinci*® Surgery



*da Vinci*.Surgery

## The Conditions:

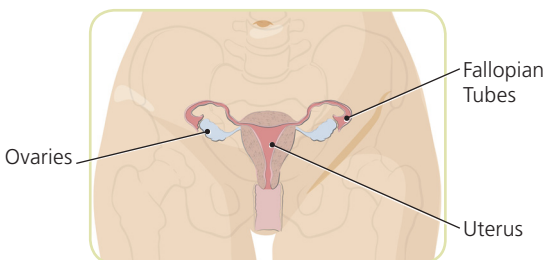
### Chronic Pain, Heavy Bleeding, Fibroids, Endometriosis, Adenomyosis, Prolapse

Many benign (non-cancerous) conditions can affect a woman's reproductive system, which consists of the uterus, vagina, ovaries and fallopian tubes. Most of these conditions affect the uterus, which is the hollow, fist-sized organ that holds a baby during pregnancy.

Common benign conditions include: fibroids which are growths in and/or around the uterus, endometriosis which occurs when your uterine lining grows outside the uterus, adenomyosis which occurs when your uterine lining grows into the wall of the uterus, and pelvic prolapse which is the slipping of the uterus, vagina and/or bladder.

Gynecologic conditions can cause many different symptoms, including no symptoms. Some of the more common symptoms can include: pelvic pain, heavy bleeding, irregular periods, fatigue, unusual bloating, pain during intercourse and infertility.

If your symptoms are severe, your doctor may recommend non-surgical treatments or a surgical option, such as hysterectomy (removal of the uterus). An estimated one third of all U.S. women will have a hysterectomy by age 60.<sup>1</sup> While this figure is lower in many other countries, it is still a common surgical procedure worldwide.<sup>2</sup>



# The Surgery:

## Hysterectomy

If your doctor recommends that you have a hysterectomy, there are a few ways your uterus can be removed. Your surgeon can remove your uterus via a vaginal hysterectomy, abdominal hysterectomy or laparoscopic (minimally invasive) hysterectomy.

A vaginal hysterectomy is done through a cut in your vagina. The surgeon takes your uterus out through this incision and closes it with stitches.

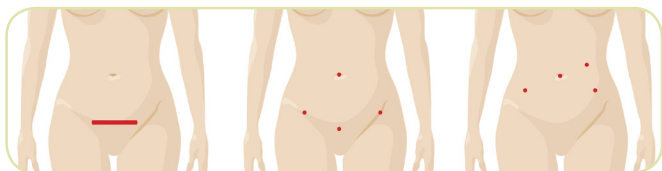
With an abdominal hysterectomy, your surgeon removes your uterus through a large open incision. The incision must be large enough for your surgeon to fit his or her hands inside your body. Open surgery allows doctors to see and touch your organs.

Hysterectomy can also be performed using traditional laparoscopic surgery. This means your surgeon operates through a few small incisions in the



abdomen. The uterus is removed in this minimally invasive fashion using long-handled surgical instruments. One of the instruments is an endoscope – a narrow tube with a tiny camera at the end. The camera sends images to a video monitor in the operating room which guides your surgeon during the operation.

There is another minimally invasive surgical option for women considering hysterectomy, *da Vinci* Surgery.



**Open Surgery**  
Incision

**Laparoscopy**  
Incisions

***da Vinci***  
Incisions



# *da Vinci* Surgery:

## A Minimally Invasive Surgical Option

If you plan to have a hysterectomy, ask your doctor about *da Vinci* Surgery. Using the *da Vinci* System, your surgeon makes a few small incisions - similar to traditional laparoscopy. The *da Vinci* System features a magnified 3D HD vision system and special instruments that bend and rotate far greater than the human wrist. *da Vinci* enables your doctor to operate with enhanced vision, precision, dexterity and control.

As a result of *da Vinci* technology, *da Vinci* Hysterectomy offers the following potential benefits compared to traditional open surgery:

- › Less blood loss<sup>3</sup>
- › Fewer complications<sup>3</sup>
- › Shorter hospital stay<sup>3</sup>
- › Minimal scarring

As a result of *da Vinci* technology, *da Vinci* Hysterectomy offers the following potential benefits over traditional laparoscopy:

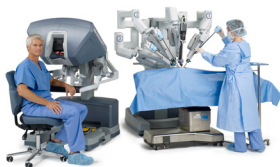
- › Less blood loss<sup>4</sup>
- › Lower conversion rate to open surgery<sup>4</sup>
- › Shorter hospital stay<sup>4,5</sup>
- › Less need for narcotic pain medicine<sup>6,7</sup>

### **Risks & Considerations Related to Hysterectomy & *da Vinci* Surgery:**

Potential risks of a hysterectomy procedure include:

- Separation of the vaginal incision
- Blocked lung artery
- Urinary tract injury

In addition to these risks, there are risks related to minimally invasive surgery, including *da Vinci* Surgery for hysterectomy, such as hernia (bulging tissue at incision site).<sup>6</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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PN 871969 Rev E 07/2013

## Your doctor is one of a growing number of surgeons worldwide offering *da Vinci*® Surgery.

For more information and to find a *da Vinci* surgeon near you, visit:

[www.daVinciSurgery.com](http://www.daVinciSurgery.com)

<sup>1</sup>“Hysterectomy”. Medline Plus; A Service of the U.S. National Library of Medicine – National Institutes of Health. Available from: <http://www.nlm.nih.gov/medlineplus/hysterectomy.html> <sup>2</sup> National Institutes of Health. Hysterectomy. Available from: <http://www.nlm.nih.gov/medlineplus/ency/article/002915.htm> <sup>3</sup> Landeen LB, Bell MC, Hubert HB, Bennis LY, Knutsen-Larson SS, Seshadri-Kreaden U. Clinical and cost comparisons for hysterectomy via abdominal, standard laparoscopic, vaginal and robot-assisted approaches. *S D Med.* 2011 Jun;64(6):197-9, 201, 203 passim. <sup>4</sup> Payne, T. N. and F. R. Dauterive. A comparison of total laparoscopic hysterectomy to robotically assisted hysterectomy: surgical outcomes in a community practice. *J Minim Invasive Gynecol*, 2008;15(3): 286-291. <sup>5</sup> Giep BN, Giep HN, Hubert HB. Comparison of minimally invasive surgical approaches for hysterectomy at a community hospital: robotic-assisted laparoscopic hysterectomy, laparoscopic-assisted vaginal hysterectomy and laparoscopic supracervical hysterectomy. *J Robot Surg.* 2010 Sep;4(3):167-175. Epub 2010 Aug 10. <sup>6</sup> Shashoua AR, Gill D, Locher SR. Robotic-assisted total laparoscopic hysterectomy versus conventional total laparoscopic hysterectomy. *JLS.* 2009 Jul-Sep;13(3):364-9. <sup>7</sup> Betcher R MD, Chaney P MD, Otey S MD, Wood D DO, Lacy P MD, Lee M RN, Chi G PhD. A Retrospective Analysis of Post Operative Pain in Patients Following *da Vinci* Robotic Hysterectomy and Total Laparoscopic Hysterectomy. Oral presentation, presented at: AAGL 2012.

## 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.