

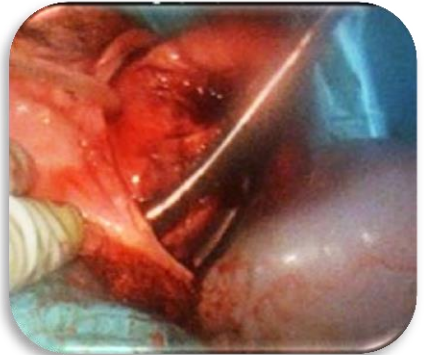
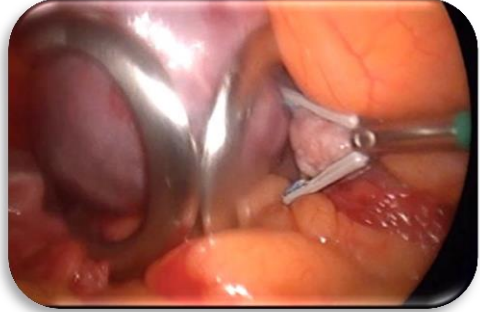
# A Unique Method of Uterine Extraction at Total Laparoscopic Hysterectomy (TLH)

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## Introduction

The prevalence of the TLH has been increasing in Australia for the past 30 years. A TLH, when compared to a laparotomy, has less intraoperative blood loss, reduced length of hospital stay, less wound infections and the patient has a quicker recovery.<sup>1</sup> This minimally invasive option does have barriers including the removal of a large specimen.



## Objective

To demonstrate the useful technique of removing an enlarged uterus vaginally during a TLH using Wrigley forceps.

## Discussion

When a surgeon is considering uterine removal with Wrigley forceps preoperatively, the risks of this must also be discussed with the woman including the possibility of vaginal tears, injury to bowel as well as increased post-operative vaginal pain. Forceps are introduced per vagina using the usual technique. In these still photos, you can clearly see once the forceps blades are placed around the uterus, care is taken laparoscopically to ensure bowel, bladder and ovaries are clear of the blades to prevent possible injury.

## Conclusion

Removal of a bulky uterus vaginally with forceps is a feasible and safe procedure if appropriate precautions are considered. This method of removal should be considered prior to the decision to perform a laparotomy.

### References:

1. Aarts J, Nieboer T, Johnson N, Tavender E, Garry R, Mol B et al. Surgical approach to hysterectomy for benign gynaecological disease. Cochrane Database of Systematic Reviews. 2015.