

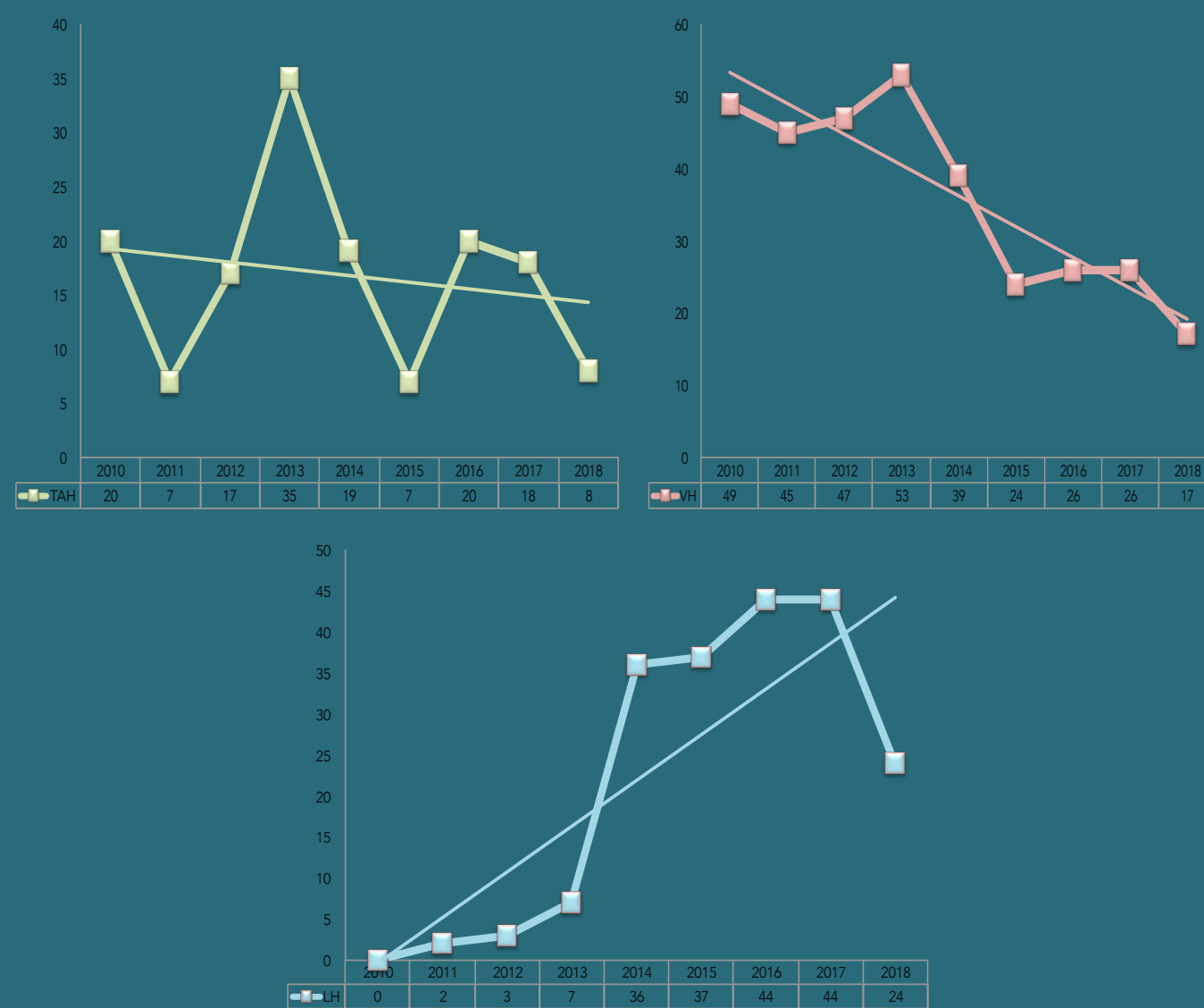
# Hysterectomy Approach and Outcomes in a Regional Victoria Hospital

Madeleine Ward<sup>1,2</sup>, Carolyn Wilde<sup>2</sup>

1. West Gippsland Healthcare Group, Warragul 2. Monash Health, Melbourne

Contact: madeleine.ward@trainee.ranzcog.edu.au

## Ten Year Trend in Hysterectomy Approach



## INTRODUCTION

Hysterectomies are the second most common genital tract operation performed on women<sup>1</sup>. The differing approaches to hysterectomies including vaginal, laparoscopic and abdominal, are limited by appropriate selection based on pathology, patient co-morbidities and surgical access.

## METHODS

We have identified the trends in the operative approach to hysterectomy being performed in a regional gynaecology service in Victoria from 2010 to 2019 via a retrospective audit of electronic databases. Smoking status, operative complications and Length of Stay (LoS), were also analysed.

## DISCUSSION

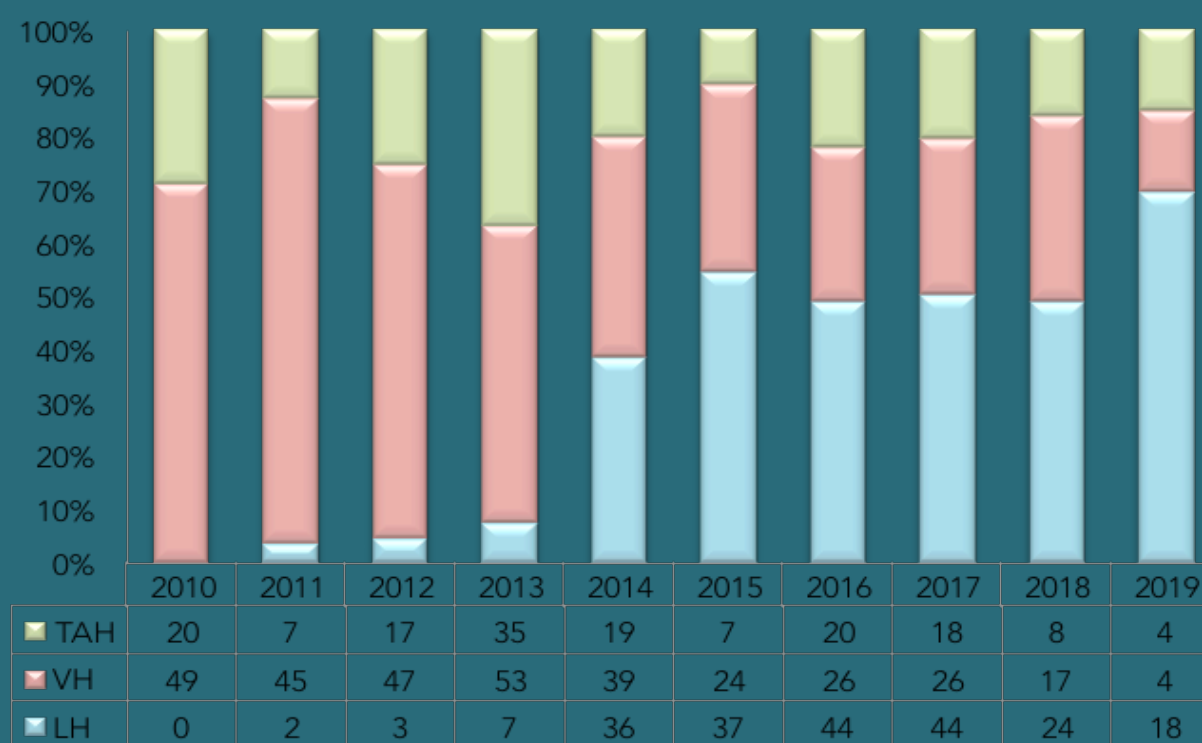
Laparoscopic hysterectomies are an advanced minimally invasive surgical technique, which are preferred by women and are known to have less intraoperative blood loss, a shorter length of hospital stay and a faster return to activities<sup>1</sup>.

Despite an overall decline in the number of hysterectomies being performed, there is a trend towards an increase in the percentage of laparoscopic procedures<sup>2</sup> and decrease in both open and vaginal approach. With surgical experience and access an important factor for outcomes.

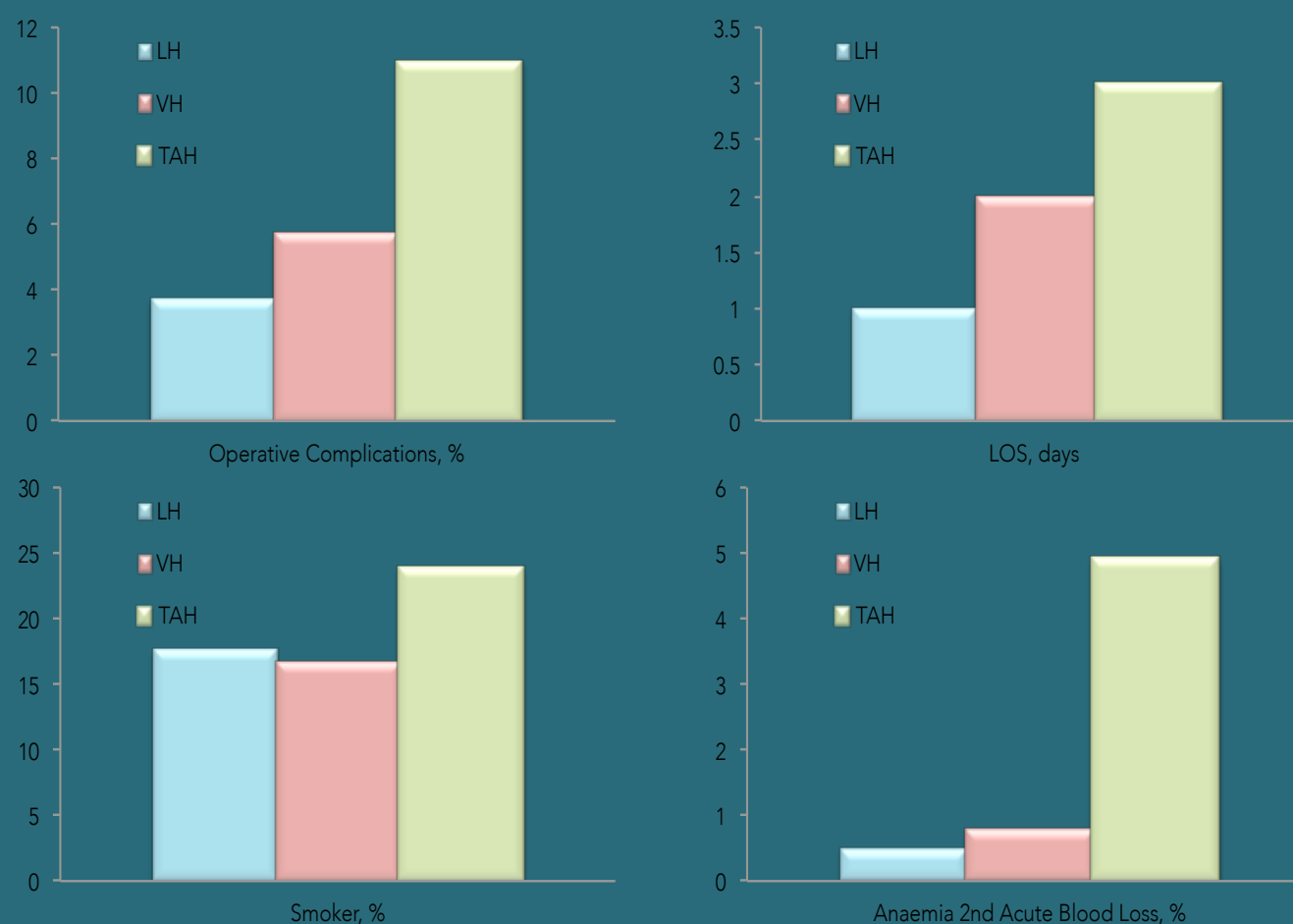
## CONCLUSION

Total Laparoscopic hysterectomy is increasing in this regional centre and is associated with lower surgical morbidity and a shorter LoS than abdominal and vaginal approach. Regional women are known to have inequitable access to healthcare despite higher health needs, and increased vulnerabilities stemming from lower levels of socioeconomic stability, income and education. The provision of a surgical gynaecological service, delivered by a skilled and committed medical workforce is essential to overcoming these health inequalities<sup>3</sup>.

## Number of Procedures per Hysterectomy Approach



## Complications & Comorbidities by Hysterectomy Approach



## REFERENCES

- Laparoscopic vs transvaginal cuff closure after total laparoscopic hysterectomy: a randomized trial by the Italian Society of Gynecologic Endoscopy. American journal of obstetrics and gynecology
- Trends in the national distribution of laparoscopic hysterectomies from 2003 to 2010. Journal of minimally invasive gynecology.
- Primary health care in rural and remote Australia: achieving equity of access and outcomes through national reform. Bendigo: Monash University School of Rural Health.