20 | RANZ Vir 21 | Sci

RANZCOG Virtual Annual Scientific Meeting 15-18 February

The impact of age and parity on regret following hysterectomy for benign disease

Charlotte Reddington^{1,2}, Uri Dior¹, Claudia Cheng^{1,2}, Helen MacNamara¹, Roshan Karri^{1,2}, Prakashini Bradley¹, Lesley Stafford^{1,2}, Martin Healey^{1,2} 1.The Royal Women's Hospital, Parkville, Vic, Australia. 2. The University of Melboume, Parkville, Vic, Australia.

Background: While young age is an established risk factor for regret following female sterilization there is a paucity of data regarding risk factors for relief and regret following elective hysterectomy for benign disease.

Methods: Cross sectional survey of a cohort of women who underwent elective hysterectomy at age <51 years for benign conditions at the Royal Women's Hospital between 2008 – 2015. Current depression, anxiety and stress was measured with the Depression Anxiety Stress Scale Short Form (DASS-21). The personality trait neuroticism was measured with the International Personality Item Pool (NEO-IPIP).

Results: 272 participants completed the survey

- 6.8% (n=18) reported regretting having a hysterectomy
- No difference in age (mean 41.8 vs 43.2 years, p=0.24) or parity (mean 1.7 vs 1.5, p=0.59) between those who regret vs do not regret
- Rate of regret not different between the younger group (aged <36 at time of hysterectomy) vs older group (aged 36-50) (10.7% vs 6.4%, p=0.391)
- Desire for future fertility at time of hysterectomy associated with higher risk of regret, compared to those not desiring future fertility (17% vs 4%, p=0.002)
- On multivariate analysis predictors of future regret were not receiving enough information about hysterectomy pre-operatively (aOR 6.59, 95% CI 1.95, 22.23), desire for future fertility (aOR 3.35, 95% CI 1.02, 11.0) and a history of endometriosis (aOR 3.19, 95% CI 0.98, 10.38)
- Those experiencing regret had higher levels of depression, anxiety and stress than those who did not regret (see table)

Discussion: Rate of regret following elective hysterectomy for benign disease is low. Age and parity do not significantly differ in those who regret vs do not regret hysterectomy. Predictors for regret are reporting not receiving enough preoperative information, desire for future pregnancy and a history of endometriosis. People experiencing regret have higher levels of depression, anxiety and stress.

BASELINE DEMOGRAPHICS							
Age (years) at time of hysterectomy, mean (SD) [range]	43.1 (4.9) [26-50]						
Heterosexual, n (%)	241 (88.6%)	60					
Transgender, n (%)	1 (0.4%)						
Gravidity, mean (SD)	2.6 (3.7)						
Parity, mean (SD)	1.5 (1.2)	Percent 40					
Nulliparity, n (%)	59 (21.7%)	Pe					
Most important reason for hysterectomy, n(%) - Pain - Bleeding - Prolapse - Family history of cancer	77 (28.3%) 116 (42.6%) 9 (3.3%) 8 (2.9%)	20	Strongly disagree	Disagree	Neither agree nor	Agree	Stro
- Other	56 (20.6%)		0,		disagree	-	
Time (years) since hysterectomy at time of survey, mean (SD)	7.6 (2.2)	"I regret having a hysterectomy"					

	REGRET N = 18	NO REGRET N = 245	p value
Age (years) at time of hysterectomy, mean (SD)	41.8 (4.9)	43.2 (4.9)	0.24
Parity, mean (SD)	1.7 (1.2)	1.5 (1.3)	0.59
Any living child at time of hysterectomy (own, step or adopted), n(%)	15 (83.3%)	181 (73.9%)	0.37
Desire for future pregnancy at time of hysterectomy, n (%)	7 (46.7%)	35 (15.4%)	0.002*
Reported receiving enough information before hysterectomy, n (%)	8 (47%)	214 (87%)	<0.001*
Bleeding was <u>a</u> reason for hysterectomy, n(%)	8 (44.4%)	184 (75.1%)	0.005*
Single most important reason for hysterectomy, n(%) - Pain - Bleeding - Prolapse - Family history of cancer - Other	5 (29.4%) 4 (23.5%) 0 (0%) 2 (11.8%) 6 (35.3%)	71 (29%) 110 (44.9%) 9 (3.7%) 6 (2.4%) 49 (20%)	0.07
Currently being treated for Anxiety/Depression at time of survey, n(%)	9 (50%)	56 (23%)	0.037*
DASS Depression score at time of survey, mean (SD)	6.6 (6.4)	2.8 (3.9)	0.034*
DASS Anxiety score at time of survey, mean (SD)	4.8 (6.6)	2.2 (2.9)	0.14
DASS Stress score at time of survey, mean (SD)	8.1 (6.9)	3.9 (3.8)	0.029*
NEO-IPIP (Neuroticism) score, mean (SD)	28.9 (9.9)	25.0 (8.3)	0.08







The author was the recipient of the Taylor- Hammond Research Scholarship offered by The Anatomy of Complications Workshop under the auspices of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) Women's Health Foundation for 2020.