

## Patient information factsheet

# Power morcellation technique for uterus or uterine fibroid removal via keyhole surgery

We have given you this factsheet because your doctor has recommended that you have surgery to remove your uterus (hysterectomy) or uterine fibroids (myomectomy). This factsheet has been written for patients who may be able to have this surgery via laparoscopy (keyhole surgery), using a technique called power morcellation. This factsheet explains the power morcellation technique and its benefits and risks. It aims to support the discussions you will have with your surgical team to help you decide if this is right option for you. This factsheet should be considered alongside the other information we will give you about the type of surgery you are having.

If you have any questions about your surgery or anything covered in this factsheet, please speak to a member of our team using the contact details on page 3.

### What is a hysterectomy?

Hysterectomy is the term used to describe the surgical removal of your womb (uterus). It may also involve the removal of your fallopian tubes and ovaries. You will be given a separate factsheet about this surgery.

### What is a myomectomy?

Myomectomy is the term used to describe the surgical removal of uterine fibroids. Fibroids (also called leiomyomas) are non-cancerous growths that develop in or around your uterus. Uterine fibroids are made from muscle and fibrous tissue. They vary in size.

In some women, uterine fibroids cause:

- heavy or prolonged periods
- infertility
- urinary symptoms
- pressure or pain in the pelvis

You will be given a separate factsheet about this surgery.

### What is laparoscopy (keyhole surgery)?

Laparoscopy is a type of surgical procedure that allows a surgeon to access the inside of the abdomen (tummy) and pelvis without having to make large incisions in the skin. This procedure is also known as keyhole surgery or minimally invasive surgery.

## What is the power morcellation technique?

The power morcellation technique is when a special surgical device is used during keyhole surgery to help remove the uterus or uterine fibroids. The device is inserted through a small cut (1.5 centimeters) in your abdomen (tummy). It breaks the uterus or uterine fibroids into smaller pieces which can be removed more easily from the small abdominal incisions.

The power morcellation technique is performed inside an endoscopic retrieval bag (a small containment bag used to keep the uterus or uterine fibroids away from the abdominal organs). This reduces the risk of the tissue spread during power morcellation. Your doctor will talk to you more about this during a clinic appointment.

## Who can have the power morcellation technique?

Your doctor will suggest the power morcellation technique if:

- your uterus, fallopian tubes and ovaries cannot be removed through your vagina
- your uterus needs to be removed but your cervix will be left in place
- you are having uterine fibroids removed

We would not recommend the power morcellation technique if:

- you are over 50 years of age
- you have been through the menopause
- there is a possibility that you may have cancer in your uterus (uterine cancer) or uterine fibroids

If you have an increased risk of uterine cancer, your doctor will discuss your case with a group of oncology (cancer) experts called a multidisciplinary team (MDT). They will recommend the best treatment for you.

## Benefits of the power morcellation technique

One of the benefits of the power morcellation technique is that you are able have your operation via keyhole surgery. The benefits of having keyhole surgery are:

- less pain than after open surgery
- less time in hospital than after open surgery
- reduced risk of blood clots in your legs or lungs than after open surgery
- lower risk of infection than after open surgery
- a quicker recovery than after open surgery

## Risks of the power morcellation technique

Although there are clear benefits to keyhole surgery as outlined above, it's important that you are also aware of the specific risks associated with the power morcellation technique. These include:

### Potential risk of undiagnosed cancer being spread

Although you have not been diagnosed with cancer and are having surgery for a benign condition (not related to cancer), it is important to understand that:

- the power morcellation technique can potentially cause undiagnosed cancer to spread
- if this happens, you may need additional treatment such as chemotherapy, radiotherapy or further surgery

Your doctor will explain this to you in more detail. If there are any concerns about the presence of cancer, your doctor will not suggest using the power morcellation technique.

## Potential risk of unexpected uterine sarcoma in the fibroids

There is a potential risk of unexpected uterine sarcoma (when cancer cells form in the muscles of the uterus or in the tissues that support the uterus) in the fibroids. Various studies have quoted this risk as ranging from:

- 1 in 65 to 1 in 278 (if you are over 60 years of age)
- 1 in 158 to 1 in 303 (if you are between 50 and 59)
- 1 in 304 to 1 in 1250 (if you are younger than 50)

This type of cancer is difficult to diagnose on the tests and investigations you may have had or been offered before surgery, so it is important to mention this.

(This information has been quoted from the Royal College of Obstetricians and Gynaecologists' "Power morcellation for myomectomy or hysterectomy - Information for you" factsheet. A link to this can be found at the end of this factsheet.)

## Fibroid dissemination (spreading)

There is a risk of fibroid tissues spreading in your abdomen during the power morcellation technique. However, the risk is reduced because the power morcellation technique is performed inside an endoscopic retrieval bag (containment bag). Your doctor will talk to you about this in more detail.

## Alternatives to the power morcellation technique

There are alternatives to the power morcellation technique. Your doctor will discuss these with you.

### Open surgery

We may be able to make a cut on your abdomen (usually 15 to 20 centimeters long). The cut is either:

- low down on your abdomen (bikini line)
- down the middle of your abdomen from your belly button (midline)

Your uterus or uterine fibroids will be removed through this cut.

It's important to understand that the risks of having open surgery need to be balanced with the benefits of keyhole surgery, alongside the associated risks of the power morcellation technique. Your surgical team will help ensure that you understand your options before making a decision. We encourage you to discuss any concerns you may have and will be pleased to answer your questions.

## Contact us

If you have any further questions about your surgery, please contact us.

### Consultants' secretaries

Telephone: **023 8120 8504**

Telephone: **023 8120 6041**

# Patient information factsheet

## Useful links

### NHS UK

Website: [www.nhs.uk](http://www.nhs.uk)

Hysterectomy: [www.nhs.uk/conditions/hysterectomy/](http://www.nhs.uk/conditions/hysterectomy/)

Myomectomy: [www.nhs.uk/conditions/fibroids/treatment/](http://www.nhs.uk/conditions/fibroids/treatment/)

### Royal College of Obstetricians and Gynaecologists (RCOG)

The Royal College of Obstetricians and Gynaecologists (RCOG) works to improve women's healthcare across the world. They are committed to developing the accessibility and quality of education, training and assessments for doctors wishing to specialise in obstetrics and gynaecology.

Their current information leaflet on the power morcellation technique can be found here:

[www.rcog.org.uk/for-the-public/browse-all-patient-information-leaflets/power-morcellation-for-myomectomy-or-hysterectomy-information-for-you/](http://www.rcog.org.uk/for-the-public/browse-all-patient-information-leaflets/power-morcellation-for-myomectomy-or-hysterectomy-information-for-you/)

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **0800 484 0135** or email [patientsupporthub@uhs.nhs.uk](mailto:patientsupporthub@uhs.nhs.uk)

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit [www.uhs.nhs.uk/additionalsupport](http://www.uhs.nhs.uk/additionalsupport)