

Hysterectomy: all you need to know

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What is a hysterectomy?

As a woman, you may have come across this term several times. You may also know someone who has had one or is about to have one. This woman could also be you. So, to answer that all-important question on your mind – what is a **hysterectomy**?

A hysterectomy is an operation to remove the uterus, also known as the womb. Depending on the type of hysterectomy, other organs, such as the fallopian tubes and ovaries, may also be removed.

Most commonly, during a hysterectomy, both the uterus and cervix are removed. This is known as a total hysterectomy. However, there are certain situations in which only the uterus will be removed. This is known as a subtotal hysterectomy and is much less common.

Why might you need a hysterectomy

Many conditions can lead to a woman requiring a hysterectomy. Some of the most common reasons include:

- Heavy menstrual bleeding
- Uterine fibroids
- Uterine prolapse
- Cancer (uterus/cervix/ovary/endometrium)

A hysterectomy is usually the last solution to be considered once all other treatments have been tried and failed.

The different types of hysterectomy

Before undergoing a hysterectomy, it is essential that you understand the type of hysterectomy that is going to be performed and whether your ovaries and fallopian tubes will be removed. Before surgery, ensure you ask all questions you may have.

There are a few different types of hysterectomies, and each one serves its own purpose. To give some idea of what they are, we have listed them below.

- Sub-total or partial hysterectomy** – This type of surgery is the least common in Australia, involving removing the upper two-thirds of the uterus, the fallopian tubes, and preserving the cervix.
- Hysterectomy with ovarian conservation** – Sometimes known as a total hysterectomy, this type of surgery involves the removal of the uterus, cervix, fallopian tubes, and the preservation of the ovaries.
- Hysterectomy with oophorectomy** – This involves the removal of the uterus, cervix, fallopian tubes, and one or both sets of ovaries.
- Radical or Wertheim’s hysterectomy** – This type of surgery is used in the treatment of some gynaecological cancer cases, and involves the removal of the uterus, cervix, fallopian tubes, ovaries, nearby lymph nodes, and the upper portion of the vagina.

How is a hysterectomy performed?

As we’ve uncovered, there are many types of hysterectomy, and they are performed for various reasons. Therefore, the way in which a hysterectomy will be performed will also depend on your individual situation. There are one of four methods through which your doctor may perform a hysterectomy. These are:

- Abdominal hysterectomy** – This is where an incision is made either horizontally above the pubic hairline (bikini line) or vertically from the navel to the pubic hairline. It is most commonly carried out when the patient has cancer, an enlarged uterus, is obese, or has large fibroids, extensive adhesions, or endometriosis. An abdominal hysterectomy has a lower chance of damage to the urinary tract and blood vessels, but it is generally more painful.
- Laparoscopic hysterectomy** – This type of operation is performed by making small incisions in the abdomen, also known as a ‘keyhole,’ through which a laparoscope is inserted. With the insertion of a camera, this surgical instrument allows the doctor to view the interior of the abdominal cavity. Additional surgical instruments are then inserted through the ‘keyhole’ to complete the surgery with the aid of a video screen. The advantage of a laparoscopic hysterectomy is a faster recovery time, but it does increase some risks, such as damage to the urinary tract.
- Vaginal hysterectomy** – This surgery involves making an incision in the upper portion of the vagina and removing the uterus through the vagina. A vaginal hysterectomy is mostly recommended for non-cancerous conditions, with the advantage of being less painful.
- Robotic hysterectomy** – This is a procedure Dr Kothari performs using the latest and most up-to-date technology. He will discuss your suitability for this option at your consultation.

What to expect after a hysterectomy

After your operation, you can expect to

- spend two to five days in the hospital
- feel some soreness around the operation site, for which you will be given pain relief medication
- have some vaginal bleeding
- have a catheter (tube) in your bladder to drain urine until you can walk to the toilet

Most women recover within two to six weeks. However, your recovery will depend on several factors, such as:

- Your health before the operation.
- The reason for your hysterectomy.
- The type of hysterectomy performed.

We advise you to keep as active as possible to avoid any blood clots. However, also ensure you get plenty of rest and stay hydrated. Avoid any strenuous work and heavy lifting.

Get the advice you need

Your doctor must fully inform you about the different risks and complications that may arise during and after a hysterectomy.

Dr Kothari will discuss any concerns you may have before opting for this type of surgery.

Call 02 4225 1999 to book an appointment and get all the advice you need to prepare for your surgery.

Call: 02 4225 1999

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