Patient & Family Guide

Laparoscopic Hysterectomy

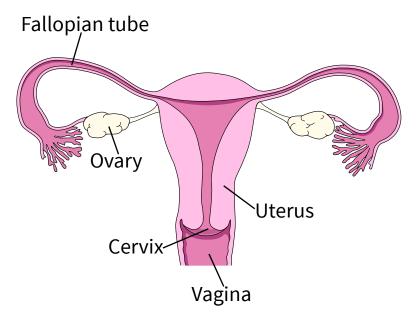


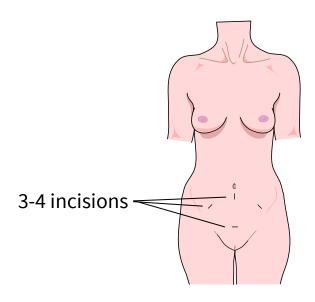
Laparoscopic Hysterectomy

What is a laparoscopic hysterectomy?

A laparoscopic hysterectomy is an operation to remove your uterus (womb) and cervix through your vagina. The ovaries and fallopian tubes are often taken out at the same time. Depending on your diagnosis, the lymph nodes in your pelvis may be removed as well.

Laparoscopic means the operation is done using a laparoscope (tube with a light on the end) that lets your doctor do surgery without having to make big incisions (cuts). The doctor will make 3 or 4 small incisions in your abdomen (stomach area) for the laparoscope. The surgery will be done through these incisions.





Before surgery

- Testing (e.g. blood tests, X-rays) may be done.
- Do not eat or drink after midnight the night before your surgery.

After surgery

After surgery you will have:

- 3-4 small incisions in your abdomen.
- An intravenous (IV) to give you fluids. The IV will be taken out when you are able to drink.
- A catheter (tube) in your bladder to drain urine (pee), if needed.

Breathing

You will be asked to take deep breaths and cough every 1-2 hours. You will be given an Incentive Spirometer (device that helps you take slow deep breaths) to help you with this. This helps to prevent lung problems such as pneumonia.

Pain

You will feel sore the first few days after surgery. You will be given medication to help with the pain. Please tell your nurse when you are starting to feel sore instead of waiting until the pain gets bad. Pain medication can be given every 3-4 hours as needed.

Activity

Your nurse will help you to get out of bed after surgery. You can help your recovery by getting up and walking as much as you can.

Food

You can eat and drink soon after surgery. When you are drinking well, the IV will be taken out.

Vaginal bleeding

Light vaginal bleeding is normal. It may be reddish to brownish discharge. While you are in hospital, your nurse will check with you to see how much discharge you are having. Continue to wear pads when you are at home.

Incision care

Keep your incisions clean and dry. If you have strips of tape (called Steri-Strips™) on your incisions, you can remove them 5-7 days after surgery, or they may fall off on their own.

Blood clots

In the hospital you may get an injection of a blood-thinning medicine called Fragmin[®]. This injection, plus moving your feet and legs every hour, will help prevent blood clots from forming.

Menstrual cycle

- After a hysterectomy, you will no longer have menstrual periods.
- If both of your ovaries were removed, you will go through menopause.

At home

Please read the pamphlet, At Home After Gynecological Surgery.

- Keep your incisions clean and dry.
- You will tire easily. Gradually go back to your normal activities.
- Do not lift anything heavier than 15 pounds for 4-6 weeks.

- You may have reddish to brownish discharge from your vagina for 1-2 weeks. Contact your doctor if the discharge becomes heavier than a normal period, has a foul odour (bad smell), or if there is heavy bleeding.
- Do not use tampons for 6 weeks.

Sex

Do not have sexual intercourse (sex) for about 6 weeks after surgery. You can engage in other sexual activities, such as cuddling, caressing and embracing, as you wish.

You and your partner should start slowly and gently. Water-based lubricants may be helpful if sex is uncomfortable.

Your abdomen may feel tender. It may take several months before you feel completely comfortable. You may want to try intercourse positions that take pressure off your abdomen, such as side-lying or being on top.

Each woman reacts in a different way to this surgery. You may feel worried about its effects on you and your partner. This is normal. Give yourself time to adjust physically and emotionally. Most women get back to their normal routines and activities within a few months after surgery.

Call your doctor or go to the nearest Emergency Department if you have:

- fever (temperature of 38.5°C or 101.3°F or higher)
- more redness, swelling or warmth around your incisions
- more pain or tenderness around your incisions
- separation of the edges of an incision
- › drainage from your incisions
- vaginal discharge that is heavier than a normal period or has a bad smell
- chest pain, shortness of breath, or pain, redness and swelling of one leg, as these can be signs of a blood clot

Resources

Canadian Cancer Society 1-888-939-3333 www.cancer.ca

Call or visit the website for information on sexuality and cancer.

Notes:			

Looking for more health information?

Find this pamphlet and all our patient resources here: http://library.nshealth.ca/PatientGuides
Contact your local public library for books, videos, magazines, and other resources.

For more information, go to http://library.novascotia.ca
Connect with a registered purse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca

Connect with a registered nurse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca Learn about other programs and services in your community: call 211 or visit http://ns.211.ca

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Nova Scotia Health Authority www.nshealth.ca

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The information in this pamphlet is to be updated every 3 years or as needed.

