

Gynaecology

Laparoscopic assisted vaginal hysterectomy

Laparoscopic assisted vaginal hysterectomy (LAVH) is a surgical procedure using a laparoscope (a surgical tool that has a small video camera and light on the end) to guide the removal of the uterus and/or Fallopian tubes and ovaries through the vagina.

Risks and complications

Side-effects

Side-effects are the unwanted but mostly temporary effects you may get after having the procedure. Side-effects of a vaginal hysterectomy include:

- pain, swelling and bruising
- blood-stained vaginal discharge
- feeling emotional

If your ovaries have been removed during the procedure, you will have menopausal symptoms such as hot flushes and vaginal dryness.

Complications

Complications are when problems occur during or after the operation. The possible complications of any operation include an unexpected reaction to the anaesthetic or developing a blood clot, usually in a vein in the leg (deep vein thrombosis, DVT).



Patient Information

Specific complications of a vaginal hysterectomy include:

- An infection, such as a urinary tract infection or an abscess in your pelvis
- Blood loss – you may need further treatment, such as a transfusion or, rarely, a second operation to stop the bleeding
- Damage to other organs and tissues in your abdomen, particularly your bladder and ureters (tubes that carry urine from your kidneys to your bladder) – this can cause incontinence or a frequent need to urinate
- Damage to your bowel
- Ovarian failure – there is a chance your ovaries won't function properly because they receive some of their blood supply through the uterus, which is removed during the operation
- Problems at the top of your vagina where the cervix is removed, such as slow wound healing in the short term or prolapse in later years

These risks are not common and will be discussed with you before your surgery.

The operation

On the day of your operation, you will be seen by the doctors and nursing staff that will go through the medical checks. You will be able to answer any questions or concerns you may have.

The anaesthetist will discuss the most suitable anaesthetic for you and administer this via a cannula (tiny plastic tube) in your hand.

This surgery is usually performed using a general anaesthetic where you will be asleep.

Patient Information

The operation usually lasts 1 to 2 hours depending on each individual case.

- When you wake up you will be in the recovery area in theatre in your bed and a nurse will check that you are fully awake and stable. You are likely to be very sleepy for the rest of that day
- An oxygen mask will help you with your breathing and recovery
- On return to the ward the nurses will continue to monitor you regularly and check for any vaginal bleeding
- You will have a drip to keep you hydrated which will usually be removed later that day
- You will have a catheter (small tube) in your bladder to drain your urine
- You may have a gauze vaginal pack to reduce bleeding
- After your operation you may have light vaginal bleeding
- You will be given pain relief: there are different ways of treating your pain after surgery. See the separate leaflet for details of this

After a hysterectomy, we expect that you will go home 2 to 3 days after your procedure.

After surgery

Day 1

You will be expected to stay in bed if you have a vaginal pack. This is usually removed 24 hours after surgery. Depending on when the pack is removed:

- you may be offered a shower
- you may be expected to move around your bed area
- you will be advised when you can eat and drink
- your catheter is usually removed and the nurse will ask you to produce a urine sample after this to ensure you are passing the right amount of urine
- routine health monitoring will continue
- you may have a blood test prior to discharge
- if the doctors are happy and you feel well, you can go home today

Patient Information

Day 1/2

Going home

- A blood test may be taken.
- If you need any specific medication (tablets to take home) these will be prescribed, and you may have to wait for these to be dispensed.
- Usually, doctors like you to have opened your bowels before being discharged.
- The Trust has a Hospitality Lounge where you can wait for medication or transport home.

Recovery

You may feel much more tired than usual following your operation. A hysterectomy can also be emotionally stressful leaving you feeling tearful and emotional at first. Your body and your emotions need time to recover. This can take up to 6 weeks, but will vary from person to person.

Rest as much as you can for the first few days after returning home. **This does not mean do nothing throughout the day.** It is important to start exercising and doing light activities around the house and to follow any physiotherapy or pelvic floor exercise advice you have been given.

Bleeding

You may bleed for up to 3 weeks. We advise you **not to use tampons**, but you should wear a sanitary pad. If you have any fresh bleeding or offensive smelling discharge after leaving the hospital you should contact your GP.

Any stitches in your vagina will not need to be removed as they are dissolvable. You may notice a stitch coming away after a few weeks.

It is important to maintain good feminine hygiene as this reduces the risk of infection - we recommend daily showers or bath.

Patient Information

Bowels

Your bowels may take some time to return to normal. It is common that your bowels will be affected due to the pain relief you are taking - please let your doctor know if you need any advice or medication.

Windy pain can be a problem. Ensure you have a good amount of fluids and eat foods containing fibre. Hot peppermint water may also help. The best way to relieve wind is to get out of bed and walk around.

Diet, rest, and sleep

A healthy balanced diet is helpful to speed recovery, as is sufficient rest and sleep.

Sex and emotional effect

We advise you not to have intercourse for the first 6 weeks, ideally until you have had a follow up appointment with your consultant or GP.

However, you may still not be feeling emotionally ready. It is quite normal to feel this way and these feelings should pass as you get stronger and recover from surgery.

Smear tests

You will usually no longer need smear tests unless advised by your consultant.

Weight

The operation itself should not cause you to gain weight initially. However, as you are feeling better, experiencing reduced levels of activity for a while, and have an increase in appetite, you may tend to gain weight which you may need to control.

Patient Information

Further information

As well as this leaflet you will be given leaflets called:

- Preparing for your surgery
- A physiotherapy booklet
- A pain control leaflet
- Preventing blood clots
- Anti embolic stockings

If you require any further information, please contact 024 76967340

More information can also be obtained from the following website:
www.rcog.org.uk Royal College of Obstetricians and Gynaecologists

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact the department on 024 7696 7340 and we will do our best to meet your needs.

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