Laparoscopic cervicopexy: a novel minimally invasive fertility conservative procedure for stages III and IV uterine prolapse – case series

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Abstract:

Objective: To evaluate the safety and efficacy of laparoscopic anterior abdominal wall cervicopexy (LAWC), a novel minimally invasive procedure for management of stages III and IV uterine prolapse. Subjects and methods: The procedure was performed on 39 cases with symptomatic uterine prolapse during the period from June 2012 to January 2015. The procedure was started with obliteration of the pouch of Douglas through the approximation of the uterosacral ligaments with non-absorbable suture. Then, the procedure completed through anchoring the supravaginal cervix to the anterior abdominal wall by two non-absorbable sutures taken in good bites in the dense stroma of the supravaginal cervix. Results: Uterine prolapse was diagnosed as stage III in 36 (92.3%) women and stage IV in three cases. The procedure was conducted safely without any intraoperative complications. At 3 month follow-up, there was a statistically significant reduction in the extent of prolapse at all pelvic organ prolapse quantification (POP-Q) points as compared with preoperative assessment (p = 0.000). Only five cases (12.8%) were found to have stage I uterine prolapse on evaluation by the POP-Q system after one year. Conclusion: LAWQ is a minimally invasive, simple, and highly effective procedure to treat marked uterine prolapse and seems not to compromise fertility. Keywords: Anterior abdominal wall cervicopexy, uterine prolapse, laparoscopy, uterine descent

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