

Chapter 23

Laparoscopic Surgery for Polycystic Ovarian Syndrome

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Laparoscopic Ovarian Drilling

This surgery has been advocated for polycystic ovarian disease. It is performed in women who despite weight reduction and fertility drugs, still do not ovulate. The aim of this surgery is to destroy the ovarian capsule. This will reduce androgen (g) (male hormone) production and lead to regular ovulation and pregnancy.

How is it performed?

This surgery is usually performed with 3 incisions. The first incision is in the umbilicus for the placement of the laparoscope. The second is to pass a grasper to hold the ovary and the third is to pass a "fine pin" needle diathermy instrument. This instrument is used to "drill" holes into the ovaries using electrical current. The number of holes made differ, ranging from 4 to 12. The duration of each drilling is a few seconds. This surgery can also be performed using lasers.

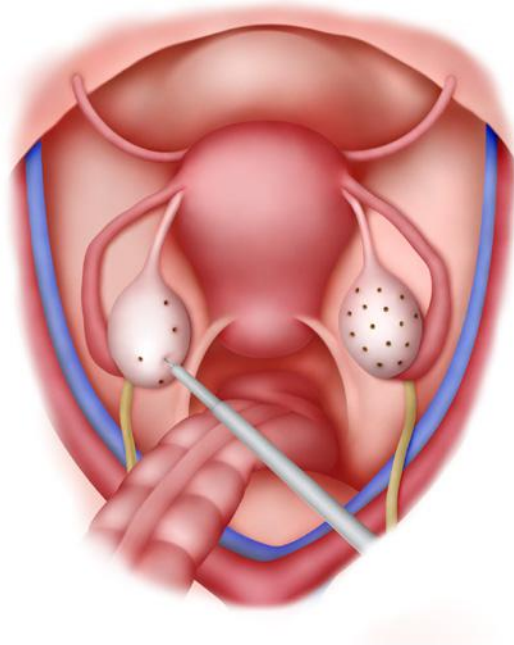


Figure 23.1 Drawing showing how Laparoscopic Ovarian Drilling is done

Advantage

The advantage of this technique is that it is easy to perform and the reported ovulation rate post operation is 80% and pregnancy rate 50%.

Disadvantage

There is a risk of ovarian scarring, formation of adhesions and damage to the ovary and its blood supply leading to premature ovarian failure.

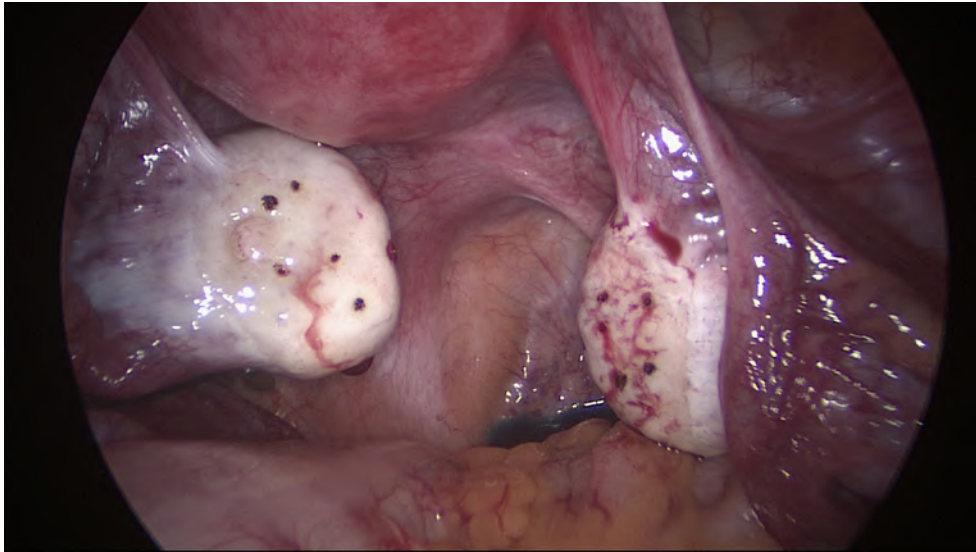


Figure 23.2 Photograph showing Laparoscopic Ovarian Drilling

Scan Me



Watch Video 23.1

Laparoscopic surgery for polycystic ovarian syndrome

<http://vimeo.com/159013473>

Summary

Laparoscopic Ovarian Drilling is one of the options often considered for the treatment of polycystic ovarian disease. It is an easy operation to perform but has a risk of premature ovarian failure