

USE OF A RESECTOSCOPE WITH SALINE IRRIGATION DURING TRANSPERINEAL PUDENDAL NERVE DECOMPRESSION

Introduction

Transperineal pudendal nerve decompression is a surgery mainly done with the finger and without visual control (1). Usually, there is no problem to open the Alcock's canal and the fascia lunata between the sacro-spinal and the sacro-tuberous ligament (2). If the surgeon wants to cut the sacro-spinal ligament it is more dangerous to damage the nerves or the vessels located in this area (3). This video is the first one showing the pudendal nerve, during the different surgical steps, with the help of a resectoscope with saline irrigation.

Design

A classical resectoscope (usually used for endometrial resection) was introduced in the ischio-rectal fossa during a transperineal pudendal nerve decompression. The patient is in gynaecological position. Warm saline irrigation is necessary to obtain a good visualisation of the nerve during the different steps of the surgery.

Results

The 5 main steps of the procedure are presented in the video.

1. The rectal nerve is hooked with the finger.
2. By following this nerve the surgeon reach the entrance of the Alcock's canal. The stretching of the rectal nerve on the internal border of this entrance during perineal descent is clearly visible on the video
3. After the opening of this canal, it is possible to see the nerve entrapped in the fascia lunata.
4. After the opening of the fascial lunata, the pudendal nerve runs around the sacro-spinal ligament or the ischial spine. The hole created by the finger between the 2 ligaments (usually 1 cm large) is clearly visible.
5. After the cut of the sacro-spinal ligament the nerve is completely free. At the beginning of our experience, this cut was done with Mayo scissors under finger control. Now we prefer to use a bipolar resectoscope and visual control to avoid nerve or vessel damages.

Conclusion

The use of a bipolar resectoscope with saline irrigation enables the surgeon to check the different steps of his decompression, to show the levels of entrapment and to cut the sacro-spinal ligament under visual control. Transperineal pudendal nerve decompression is not more a blind procedure.

References

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<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	This surgical procedure was used in our department since 1996 and the use of an endoscope didn't change the surgical approach which only becomes more secure.
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes