

LAPAROSCOPIC SACROCERVICOPEXY FOR FERTILITY PRESERVATION

Synopsis of Video

Aims of Study

Uterine prolapse in young patient is rare and presents surgical challenge when the patient desires to preserve her fertility. Anecdotal reports on abdominal and vaginal approaches were previously described. We present laparoscopic sacro cervicopexy to correct the prolapse and to enable future pregnancies.

Methods and Results

This presentation is regarding a 29 years old patient, Gravida 2, who developed symptomatic uterine prolapse following her 2nd vaginal delivery. Her POPQ was Aa: -2 Ba: -1 Ap: -3 Bp: -2 C: +1, D: -3 TVL: 8cm PB:3 cm GH: 4.5 cm. She had no urinary incontinence, and no evacuation difficulties. Urodynamic assessment was normal. Laparoscopic sacro-cervicopexy was performed using a Polypropilene mesh. Following dissection of the presacral area, the mesh was trimmed to an inverted Y figure, and six sutures were used to anchor the mesh into the uterosacral complex and the cervix. The uterosacral ligaments were plicated to prevent future enterocele. Then, the mesh was fitted to hold the uterus without tension, and was fixed into the presacral area. The mesh was covered with peritoneum. Postoperative period was uneventful, and the patient was discharged at the 3rd postoperative day. Follow up for 13 months revealed excellent anatomic results (Aa: -2 Ba: -1 Ap: -3 Bp: -2 C:-5, D:-6 TVL: 8cm PB:3 cm GH: 4.5 cm) without symptoms related to prolapse.

Conclusion

Our initial experience with laparoscopic sacrocervicopexy is promising, though longer follow up is needed.