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LAPAROSCOPIC ASSISTED VAGINAL PARAVAGINAL REPAIR

Synopsis of Video

Cystoceles are common in parous women. More than 90% cases of cystocele are associated with anatomic defect including attenuation, elongation, detachement of pubocervical fascia and vagina. Paravaginal defect may be detected though physical examination by using Richardson's: 2 tongue blades and Shull's a curved ring forceps. The POP-Q system is adopted as definition and description of cystocele in our hospital. The most appropriate surgical procedure is the paravaginal repair via vaginal, abdominal or laparoscopic approach. Paravaginal repair is accomplished by suturing the lateral aspect of the anterior vaginal wall back to its original point of attachment at arcus tendineus fascia pelvis. We will show the paravaginal repair procedure by video tape. In this video tape, the key anatomic landmarks in space of Retzius in women, both vaginal and laparoscopic technical skill will be introduced. Besides, we would like to share our clinical experience in its efficacy, safety and complications with you.