

Efficacy of combined laparoscopic uterine artery occlusion and myomectomy via minilaparotomy in the treatment of recurrent uterine myomas

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摘要

Abstract

Objective: To evaluate the therapeutic efficacy of laparoscopic uterine artery occlusion combined with myomectomy through a minilaparotomy in the treatment of recurrent uterine myomas, compared with myomectomy alone. **Design:** Controlled, nonrandomized clinical study. **Setting:** University-affiliated tertiary care referral center. **Patient(s):** Eighty-two women with symptomatic, recurrent myomas warranting surgical treatment, who expressed a strong desire to retain their uterus. Fifty-two patients (63.4%) underwent laparoscopic uterine artery occlusion and subsequent minilaparotomy and myomectomy (group I) and 30 patients (36.6%) underwent myomectomy alone (group II). **Intervention(s):** Occlusion of the uterine arteries was performed with a laparoscopic approach before minilaparotomy and myomectomy. **Main Outcome Measure(s):** The efficacy of combined laparoscopic uterine artery occlusion and myomectomy via minilaparotomy in the treatment of recurrent uterine myomas was measured by comparing blood loss, need for blood transfusion, postoperative febrile morbidity, recurrence rate of the uterine myomas, and fertility rate in the treatment (group I) and control (group II) groups. **Results:** The average blood loss was 125 ± 72.6 and 550 ± 394.8 mL in groups I and II, respectively. The recurrence rate of uterine myomas was 5.8% (3 of 52) in group I and 36.7% (11 of 30) in group II during an average follow-up period of 42.5 months. Of the sexually active patients who did not use contraception, 19.2% (5 of 26) and 22.4% (4 of 18) became pregnant in groups I and II, respectively (no statistical significance). **Conclusion(s):** This

study has demonstrated the superiority of laparoscopic uterine artery occlusion when combined with repeat myomectomy in treating recurrent symptomatic myomas..