

Laparoscopy Instructions

Laparoscopy is a minimally invasive surgery (MIS) and constitutes a surgical diagnostic procedure used to examine the organs inside the woman's abdomen, in the lower and upper parts as well (ovaries, uterus, fallopian tubes, small and large bowel, liver, gallbladder, etc.). It is a low-risk invasive procedure. Only small incisions are made. This procedure allows obtaining biopsy samples and providing the appropriate treatment. Laparoscopy is usually performed with general anesthesia, which means that the patient will sleep through the procedure and will not feel any pain.

Procedure

During Laparoscopy, the surgeon makes a small cut (incision) of around 1-1.5cm (0.4-0.6 inches), usually near your belly button. A tube is inserted through the incision, and carbon dioxide gas is pumped through the tube to inflate your tummy (abdomen). Inflating your abdomen allows the surgeon to see your organs more clearly and gives them more room to work. A laparoscope is then inserted through this tube. The laparoscope relays images to a television monitor in the operating theatre, giving the surgeon a clear view of the whole area. If the laparoscopy is used to carry out a surgical treatment, such as removing your appendix, further incisions will be made in your abdomen. Small, surgical instruments can be inserted through these incisions, and the surgeon can guide them to the right place using the view from the laparoscope. Once in place, the instruments can be used to carry out the required treatment. After the procedure, the carbon dioxide is let out of your abdomen, the incisions are closed using stitches or clips and a dressing is applied. When laparoscopy is used to diagnose a condition, the procedure usually takes 30-60 minutes. It will take longer if the surgeon is treating a condition, depending on the type of surgery being carried out.

When Laparoscopy is needed

Laparoscopy can be performed in order to diagnose complications affecting woman's fertility, such as endometriosis, adhesions (internal scar tissue caused by other surgeon or inflammation), ovarian cystic, fibroids, ectopic pregnancy, etc. It is often possible to diagnose a condition using non-invasive methods, such as an ultrasound scan or salpingography. Sometimes, however, the only way to confirm a diagnosis is to directly study the affected part of the body using a laparoscope. Laparoscopy can also be used to diagnose certain types of cancers. On the other hand, there are some contradictions for this procedure such as:

- Severe diseases at the cardiovascular, respiratory, and hematopoietic system
- Severe internal bleeding

Preparation before Laparoscopy

It is commonplace, three days before the procedure, the patient should avoid foods with lots of fiber (because they cause bloating), carbohydrates (foods with starch), legumes, and fruits. The best nutrition choices are foods with plenty of protein, salads, soups as well as any kind of fluids (tea, coffee). However the previous night before the day of the procedure, it would be ideal to not eat or drink anything around the midnight. If you're taking blood-thinning medication (anticoagulants), or any other kind of medications, it is necessary to mention it to your doctor. The previous day of the procedure you should take some rest and it might be necessary to take a mild laxative solution, in order to loose stools and increase bowel movements. We usually administered "X-Prep" (half of the bottle around 12-2 in the afternoon,) and effects after 2-10 hours. As the day has come, in the morning before the procedure, it is important to proceed into a series of Preoperative examinations (blood test investigations, cardiogram, and chest radiograph).

Recovery

After Laparoscopy, you may feel groggy and disorientated as you recover from the effects of the anesthetic. The woman should mobilize as soon as possible. For a few

days after the procedure, you're likely to feel some pain and discomfort where the incisions were made, and you may also have a sore throat if a breathing tube was used. Before you leave hospital, you'll be told how to keep your wounds clean and when to return for a follow-up appointment or have your stitches removed. The most common symptom after surgery, is the remaining of some of the gas used to inflate your abdomen and lasts for 3-5 days. Another common symptom may be vaginal bleeding, caused by the procedure. Some days or weeks after the procedure, you'll probably feel more tired than usual, as your body is using a lot of energy to heal itself.

In case of symptoms as:

- High temperature of 38C (100.4F) or above
- Chills
- Severe or continuous vomiting
- Increasing abdominal pain
- Redness, pain, swelling, bleeding or discharge around your wounds
- Abnormal vaginal discharge or severe vaginal bleeding
- Pain and swelling in one of your legs

please contact with your doctor as soon as possible and the right guidance will be given.

Is Laparoscopy a safe choice?

Possible collocations might happen depending on the severity of the condition encountered. Laparoscopy is a commonly performed procedure and serious complications are rare. Minor complications are estimated to occur in one or two out of every 100 cases following Laparoscopy, such as

- Infection

- Incision pain
- Vomiting

Serious complications after Laparoscopy are estimated to occur in one out of every 1,000 cases:

- A serious allergic reaction to the general anesthetic
- Damage to an organ such as your bowel or bladder
- Damage to a major artery