



P53. LAPAROSCOPIC MYOMECTOMY AND PERIOPERATIVE BLEEDING. NEW APPROACHES.

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Objective: One of the most actual problem of modern gynecology is the wide spread of uterine fibroids in the reproductive period. The most part of these patients need surgery treatment, and laparoscopic myomectomy (LM) is the most suitable surgical option for women who desire preservation of their fertility potential. The aim of the study was to identify factors influencing perioperative bleeding.

Methods: Data were collected for patients undergoing LM from September 2010 to September 2016. The mean age of the observed patients was 34.2 ± 4.6 years. The duration of the disease from the moment of diagnosis was an average of 5.1 ± 0.6 years. In all cases, surgical interventions were performed by laparoscopic access. The difference in perioperative management of surgical interventions (application of vasoconstrictive agents, hemostatics, mechanical maneuvers) allowed the patients to be divided into 3 groups. After removal of the myoma the myometrium was sutured in all cases. The principal was difference of stitches and sutures. The statistical analyses were performed with software package Statistica 10 Test Version.

Conclusion: Despite difference in perioperative management of surgical interventions our study showed that most perioperative bleeding – related factor was myoma diameter ($p < 0,001$). And the second factor was the difference in types of stitches and sutures ($p < 0,01$). Therefore we must pay high attention to the modern approaches of surgical interventions.

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