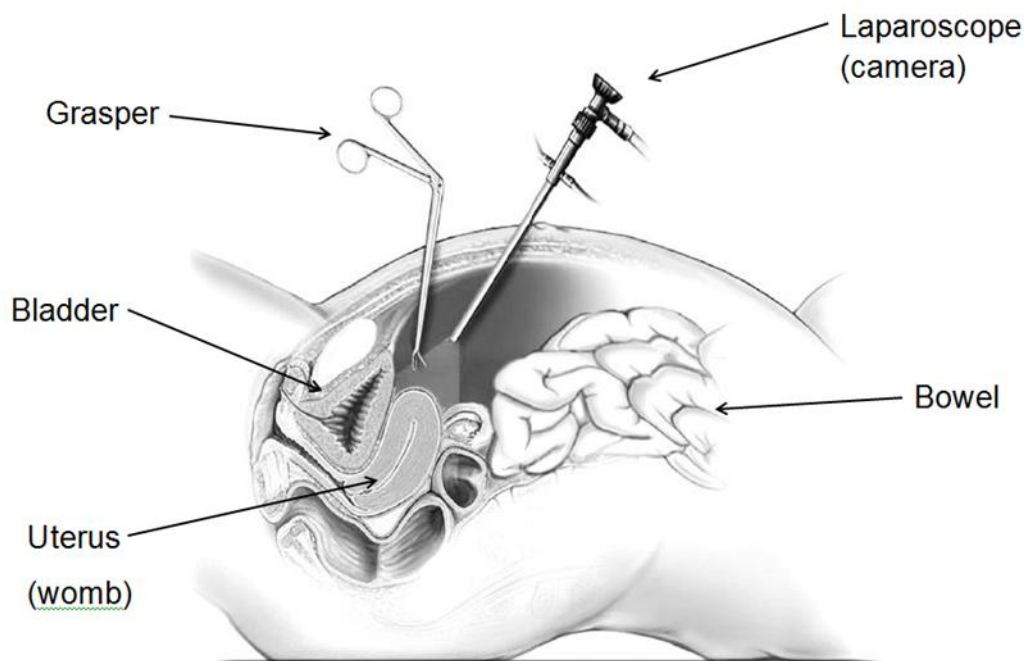


Diagnostic Laparoscopy

What is a Laparoscopy?

It is an operation performed under general anaesthetic, which involves passing a small telescope (laparoscope), through a cut in your belly button into your abdomen to look at organs inside the pelvis and abdomen. Carbon dioxide gas is inflated into the abdomen to swell out the abdominal cavity. This separates the bowel from the abdominal wall so that the laparoscope can be inserted safely. This procedure is done to find the cause of problems such as pelvic pain, painful periods, infertility or painful sex. We may be able to treat minor problems during your laparoscopy.



Why do I need to have a Laparoscopy?

A laparoscopy is used to examine your uterus (womb), fallopian tubes, ovaries and pelvic wall. It is used to investigate and plan treatment for various different conditions. For example we can look for:

- Endometriosis – where tissue similar to the lining of the womb starts to grow in other places, such as the ovaries and fallopian tubes
- Pelvic inflammatory disease – an infection of the genital tract, including the womb, fallopian tubes and ovaries which may result in abscess formation.
- Ovarian cyst - a fluid-filled sac that develops on an ovary
- Adhesions – scar tissue

What are the benefits of having a Laparoscopy?

To find a cause for your symptoms and to plan treatment if any problems are found. The operating and recovery time are shorter than with an open operation (laparotomy).

What are the risks of a Laparoscopy?

As with all operations there are always possible risks, please remember they occur rarely. Some will occur during the operation and others may not happen until you have gone home. The overall risk of serious complications from diagnostic laparoscopy is approximately 2 women in every 1,000.

Women who are obese, who have had previous surgery or who have pre-existing medical conditions must understand that the risk of serious or frequent complications may be increased. The risk of serious complications at laparoscopy also increase if a further procedure is performed

There is a small risk of damage occurring to bowel, bladder, ureters, uterus or major blood vessels during the operation. In these circumstances we would repair any damage. This would often involve a bigger wound to the abdomen and may mean you have to have a longer stay in hospital. There is a small chance of bowel injury only being apparent after discharge from hospital.

Sometimes, especially if you have had previous operation on your abdomen it may be safer to put the camera through a little cut on the left upper part of your abdomen (as opposite to through your belly button) to reduce the risk of complications. If that is the case your surgeon will discuss this with you prior the laparoscopy.

It is possible that a wound infection will develop. Any inflammation or discharge at the wound site should be reported to your GP.

There is a very small chance of developing blood clots in your legs or lungs following the procedure, which is why you will be encouraged to start mobilising following the operation.

It is unlikely that you will lose much blood during the operation but if you do it may be necessary to give you a blood transfusion.

There is a risk that we are not able to gain entry into the abdominal cavity or we are unable to complete the intended operation.

The laparoscopy may not identify any cause for your symptoms

Fasting or 'nil-by-mouth' instructions

Fasting means you cannot have anything to eat or drink (except still water) for the 6 hours prior to your operation. This means you cannot suck on sweets or chew chewing gum. You are allowed to drink clear water up to 2 hours before your operation.

If you continue to eat or drink after this, your surgery will be cancelled.

For morning surgery, do not eat after midnight, the night before. You may drink water until 06:30am.

For afternoon surgery, you can have a light breakfast, tea/coffee with toast/cereal before 07:00am. You may drink water until 11:30am.

If you are taking any medicines, you should take your usual dose before 6:00am with a sip of water, unless advised not to, at your pre op appointment.

How long will I have to stay in hospital?

Many women come into hospital, have the procedure and go home on the same day. Sometimes patients stay in overnight if they feel unwell or because of the effects of the anaesthetic. You are more likely to stay overnight if the procedure is carried out late afternoon or early evening. Whatever day / time you are discharged, you will need a friend / relative to collect you from the hospital and stay at home with you for the first 24 hours.

How will I feel after a Laparoscopy?

You may experience abdominal bloating and cramping and pain in your ribs or shoulders; this is due to insertion of gas into your abdomen at the time of the procedure. This is not serious and should ease off over the next few days. You can take simple painkillers when needed. It is important to move around regularly to help prevent complications such as blood clots in your legs. You may have some vaginal bleeding or discharge for a few days and you should use sanitary pads rather than tampons / menstrual cup to reduce your risk of infection.

What happens when I go home?

What happens to the stitches?

You will have 2 cuts (possibly 3) on your tummy and the stitches will usually dissolve and fall out, this can take up to a week and sometimes longer. If you find the stitches

irritating they can be taken out at your GP's surgery. You need to keep the wounds clean and dry.

How long will it take me to recover?

You will probably need 2-3 days to recover from the procedure and the anaesthetic. Most people will need a week off work but you can return to work as soon as you feel able.

Will I be able to drive?

You should not drive for the first 48 hours and until you can move about freely. Therefore, please arrange to be collected from hospital when you are ready to be discharged from hospital. Please check with your insurance company regarding driving following the procedure.

When can I resume intercourse?

This depends very much on what occurs and the findings during surgery. This can be discussed with a member of the ward staff before your discharge home.

Retained Tissue

Any tissue taken at the time of your operation will be sent for examination and you will be informed of the result. Following investigation, the tissue will be disposed of in accordance with health and safety. Only with your prior permission, would tissue be used for research or teaching purposes as part of an ethically approved study.

You should seek medical advice if you experience any of the issues below: from your GP, or call 111 for advice or attend the Gynaecology Emergency Department (GED) at Liverpool Women's Hospital or your Local Accident and Emergency Department

Burning and stinging when you pass urine or pass urine frequently: This may be due to a urine infection. Treatment is with a course of antibiotics.

Red and painful skin around your scars: This may be due to a wound infection. Treatment is with a course of antibiotics.

Increasing abdominal pain: If you also have a temperature (fever), have lost your appetite and are vomiting, this may be due to damage to your bowel or bladder, in which case you will need to be admitted to hospital.

A painful, red, swollen, hot leg or difficulty bearing weight on your legs: This may be due to a deep vein thrombosis (DVT). If you have shortness of breath or chest pain or cough up blood, it could be a sign that a blood clot has travelled to the lungs (pulmonary embolism). If you have these symptoms, you should seek medical help immediately.

There is no improvement in your symptoms: You should expect a gradual improvement in your symptoms over time. If this is not the case, you should seek medical advice.

Equal Opportunities

The hospital is committed to promoting an environment, which provides equal opportunities for all patients, visitors, and staff. If you have any special requirements such as dietary needs, interpreter services, disability needs or a preference for a female doctor do not hesitate to discuss this with a member of staff who will try to help you

If you have any queries or concerns, please phone either:

Liverpool Women's NHS Foundation Trust

Mon – Fri 7:30am to 9pm **0151 708 9988** Ext. **1124**

Out of Hours and Weekends **0151 708 9988** Ext. **4120**

Or telephone your GP.

Please note that Liverpool Women's NHS Foundation Trust is a smoke free site.

Smoking is not allowed inside the hospital building or within the hospital grounds, car parks and gardens.

Staff are available to give advice about stopping smoking, please ask your nurse about this.

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

Liverpool Women's NHS Foundation Trust
Crown Street
Liverpool
L8 7SS

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