This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.
Information for Patients & Visitors

Introduction

The purpose of this leaflet is to provide you with information about an Abdominal Hysterectomy procedure.

Abdominal Hysterectomy for Heavy Periods

After admission to the hospital, you will be seen either by your operating surgeon or by one of the doctors from the Gynaecological team.

You will be required to give written consent for undergoing the proposed operation.

The doctor will discuss the contents of the consent form step by step. If you fully understand the information provided and are in agreement with the procedure being undertaken, you will give written consent by signing the form. The following points will be discussed:

Name of the proposed procedure

Abdominal Hysterectomy

You should have been assessed in the clinic prior to being listed for this procedure and be aware of the reason for your surgery i.e. persisting heavy periods for which no cause has been identified, hormone imbalance that has not responded to medication or fibroids causing heavy periods etc.

The proposed procedure

The operation involves removal of the uterus and the cervix through a cut in the abdomen.

The tubes and ovaries are preserved if you are pre-menopausal and do not have any ovarian disease i.e. cysts or endometriosis etc. The ovaries will continue to provide hormones after the surgery so that you will not experience hot flushes and night sweats. If there is reason to remove the ovaries, it will be discussed. You should then be aware of menopause setting in and the possibility of requiring hormones (HRT) later.

The tubes have no function after the womb has been removed. They are removed along with the ovaries but left behind if the ovaries are being saved as the operation is easier this way. If the tubes are swollen or diseased they will be removed in any case.

A bikini line incision is normally performed but if the uterus is very big due to fibroids then a mid-line or up and down cut will be made. Some times this decision may have to be made in theatre after you have been anaesthetised.

If the procedure is difficult especially due to fibroids in the lower part of the womb, the cervix is not removed. This is known as a subtotal hysterectomy.

You will stay in hospital for 4 or 5 days depending upon your recovery.

Intended Benefits

Removal of the womb will stop your periods. Fibroids have a small risk of undergoing cancerous change which is eliminated. There will be no need for undergoing cervical smears if the cervix is removed but regular routine cytology will still be required following a subtotal hysterectomy.

Symptoms not related to the uterus i.e. premenstrual tension, pain of ovarian origin, symptoms of vaginal wall prolapse and backache due to spinal or muscular problems will not be relieved.

For more information about our Trust and the services we provide please visit our website. www.nlng.nhs.uk
Serious or frequently occurring risks following the procedure

Serious or frequently occurring risks
It is important to understand that no major surgery is free of risk and that the risk of developing complications is higher in smokers, obese patients and those with coexisting medical illnesses.

Two women in every 100 undergoing abdominal hysterectomy will experience at least one of these complications:

- Complications due to anaesthesia
- Heavy bleeding requiring blood transfusion (1.5%)
- Damage to the bladder / Ureters (0.7%)
- Damage to the bowel (0.04%)
- Injury to major blood vessels
- Return to theatre for additional stitches (0.6%)
- Pelvic abscess or infection (0.2%)
- Venous thrombosis or pulmonary embolism (0.4%)

All operations carry some risk of death (1 in every 4000).

Frequent problems after surgery:
- Post-operative pain
- Wound infection and bruising
- Frequency of passing urine, difficulty in passing urine, urinary infection
- Long term bladder disturbance
- Vaginal bleeding
- Delayed wound healing
- A thickened scar known as a Keloid scar
- Early menopause can occur even when the ovaries are saved due to alteration of the ovarian blood supply

Any extra procedures that may become necessary during the operation
If any serious complications occur during the course of the operation further surgery may be necessary to save life or prevent serious harm to future health. This includes repair to the bladder, bowel or major blood vessels. The help of a general surgeon may be required in difficult cases.

The ovaries may have to be removed if found diseased. This decision is sometimes taken in theatre after inspecting the ovaries but you will be asked to sign for an abdominal hysterectomy with or without removal of the ovaries and tubes.

Blood transfusion is required in 1.5% of cases.

What the procedure is likely to involve, the benefits and risks of any available alternative treatments including no treatment
Abdominal hysterectomy involves removal of the womb (uterus) the neck of the womb (cervix) through a cut in the abdomen. The ovaries and tubes are either left behind or removed. This will be discussed with you when you sign your consent. You should be fully aware of the reason for the surgery and if the reason does not exist anymore i.e. if you have gone through the menopause or your periods have reverted back to normal, the operation can be cancelled.
You should also understand the other treatment options available for heavy periods and should have tried these prior to coming in for a hysterectomy. These include medical treatment, wearing an intrauterine hormone containing coil i.e. Mirena or undergoing procedures that can destroy the lining of the womb. This can be achieved with microwave therapy, hot water balloon therapy, Roller ball diathermy or cutting out the lining with electric diathermy.

If you choose not to have any treatment, heavy periods will make you anemic and tired.

You will be given antibiotics during the operation to prevent infection. A urinary catheter is left in overnight and is removed after 24 hours once you are fully mobile.

**Anaesthesia**

The operation is performed under general anaesthetic. You will have the opportunity to discuss this with the anaesthetist prior to the surgery. Please inform your doctor of any medical problems, medication or drug allergies.

**Procedures which should not be carried out without further discussion**

If you object to any procedure being undertaken please inform the surgeon. Benign moles, skin tags etc noted at the time of surgery will not be removed without your prior consent.

You are expected to have used reliable contraception so that a pregnancy is avoided. A note will be made of your last menstrual period and a pregnancy test carried out if appropriate.

Tissues removed at surgery may have to be sent for histology, photographed / stored for audit or teaching purposes. Please inform the surgeon if you are in disagreement.

After discussing the above points the surgeon will sign and date the form and, if in agreement, you have to signify your general consent by signing the form.

If you have any concerns or questions please do not hesitate to speak to one of the nursing or medical staff.

**Concerns and Queries**

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

**For Diana, Princess of Wales Hospital**

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

**For Scunthorpe General Hospital**

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which is situated on C Floor.

**For Goole and District Hospital**

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290172.

**Confidentiality**

Information on NHS patients is collected in a variety of ways and for a variety of reasons...
Information for Patients & Visitors

Northern Lincolnshire and Goole Hospitals NHS Foundation Trust

Information for Patients & Visitors

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

Zero Tolerance - Violent, Threatening and Abusive Behaviour

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, you may speak to any member of the nursing staff, the designated keyworker within the department or the Trust Moving & Handling Coordinator.

Risk Management Strategy

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

Northern Lincolnshire and Goole Hospitals NHS Foundation Trust

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Scartho Road
Grimsby
01472 874111

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
01724 282282

Goole & District Hospital
Woodland Avenue
Goole
01405 720720

www.nlg.nhs.uk

For more information about our Trust and the services we provide please visit our website. www.nlg.nhs.uk