

## Your role in surgery



One way to learn more about your surgery is to ask your doctor and nurses questions.

### Here are some questions you might ask:

- What medical and surgical options are available for me?
- Which is best for my situation?
- Should I get a second opinion?
- What is the difference between the surgical options?
- What complications may occur?
- If I am a candidate for hysterectomy, how can I prepare for it?
- When will I go home?

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## What is a benign hysterectomy?

A hysterectomy is a procedure where your uterus is surgically removed with the goal of eliminating or reducing symptoms. A benign hysterectomy is the removal of a uterus for noncancerous conditions.

### Conditions that require a benign hysterectomy often include:

Endometriosis

Fibroids

Abnormal bleeding

Chronic pelvic pain

Pelvic prolapse

### Your surgeon may recommend:

Robotic-assisted surgery with the da Vinci surgical system

Laparoscopic surgery

Open surgery

### References

1. NWHN. (2018). Hysterectomy - NWHN. [online] Available at: <https://www.nwhn.org/hysterectomy/>
2. Robot-Assisted Surgery Compared with Open Surgery and Laparoscopic Surgery: Clinical Effectiveness and Economic Analyses. <https://www.ncbi.nlm.nih.gov/pubmed/24175355>
3. Clinical and Cost Comparisons for Hysterectomy via Abdominal, Standard Laparoscopic, Vaginal and Robot-assisted Approaches. <https://www.ncbi.nlm.nih.gov/pubmed/21710804>
4. Robot-assisted laparoscopic hysterectomy in obese and morbidly obese women: surgical technique and comparison with open surgery. <https://www.ncbi.nlm.nih.gov/pubmed/21854364>
5. Multicenter analysis comparing robotic, open, laparoscopic, and vaginal hysterectomies performed by high-volume surgeons for benign indications. <https://www.ncbi.nlm.nih.gov/pubmed/26952352>
6. A Comparison of Quality Outcome Measures in Patients Having a Hysterectomy for Benign Disease: Robotic vs. Non-robotic Approaches. <https://www.ncbi.nlm.nih.gov/pubmed/24513969>
7. Robot-Assisted Laparoscopic Hysterectomy vs Traditional Laparoscopic Hysterectomy: Five Metaanalyses. <https://www.ncbi.nlm.nih.gov/pubmed/22024259>
8. Robotically Assisted vs Laparoscopic Hysterectomy Among Women With Benign Gynecologic Disease. <https://www.ncbi.nlm.nih.gov/pubmed/23423414>
9. Comparison of Robotic-Assisted Hysterectomy to Other Minimally Invasive Approaches. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3558889>

### Surgical Risks

Risks associated with Hysterectomy, Benign (removal of the uterus and possibly nearby organs) include: injury to the ureters (the ureters drain urine from the kidney into the bladder), vaginal cuff problems (scar tissue in vaginal incision, infection, bacterial skin infection, pooling/clotting of blood, incision opens or separates), injury to bladder (organ that holds urine), bowel injury, vaginal shortening, problems urinating (cannot empty bladder, urgent or frequent need to urinate, leaking urine, slow or weak stream), abnormal hole from the vagina into the urinary tract or rectum, vaginal tear or deep cut. Uterine tissue may contain unsuspected cancer. The cutting or morcellation of uterine tissue during surgery may spread cancer, and decrease the long-term survival of patients.

### Important Safety Information

Patients should talk to their doctor to decide if da Vinci surgery is right for them. Patients and doctors should review all available information on

non-surgical and surgical options and associated risks in order to make an informed decision.

Serious complications may occur in any surgery, including da Vinci<sup>®</sup> surgery, up to and including death. Serious risks include, but are not limited to, injury to tissues and organs and conversion to other surgical techniques which could result in a longer operative time and/or increased complications. For Important Safety Information, including surgical risks, indications, and considerations and contraindications for use, please also refer to [www.davincisurgery.com/safety](http://www.davincisurgery.com/safety) and [www.intuitive.com/safety](http://www.intuitive.com/safety).

Individuals' outcomes may depend on a number of factors, including but not limited to patient characteristics, disease characteristics and/or surgeon experience.

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## You deserve special care

You can get back to your life after a benign hysterectomy.

INTUITIVE<sup>®</sup> maker of da Vinci



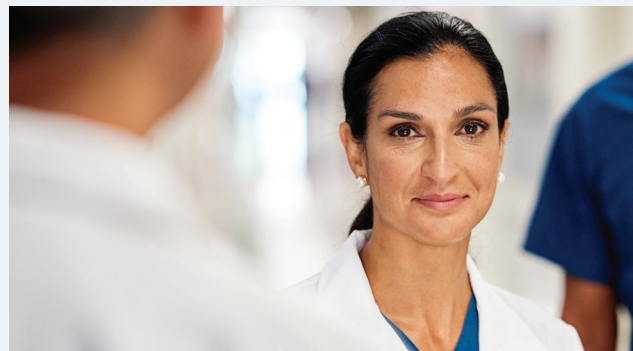
## Is it time for surgery?

Dealing with pelvic pain or heavy bleeding is hard. Learning about your options doesn't have to be—and it's okay to take time to find a surgeon that can provide the right care for you.

After talking with your doctor and trying non-surgical options like medication, you and your doctor may decide that a hysterectomy is the option to reduce or relieve your symptoms.



## What will my surgeon do?



If you and your doctor decide that robotic-assisted surgery is right for you, here is what may happen.

Actual  
incision size

During robotic-assisted surgery, your surgeon makes several small incisions, then uses a 3DHD camera for a crystal-clear, magnified view of your uterus.



He or she sits at a console next to you and operates through the incisions using tiny instruments and the camera.



Every hand movement your surgeon makes is translated by the da Vinci system in real-time, bending and rotating the instruments so he or she can remove your uterus.

## What could I experience?

You're not alone in your experience. More than one in three women have a hysterectomy by age 60.<sup>1</sup>

Over the years, surgeons have adopted techniques for performing hysterectomies, such as robotic-assisted surgery using da Vinci<sup>®</sup> technology.

A review of published studies suggest potential benefits after a benign hysterectomy with da Vinci technology are:

Patients may experience **fewer complications** compared to patients who had open<sup>2,5</sup> and laparoscopic<sup>2,5,7</sup> surgery.

Patients may stay in the hospital for a **shorter amount of time** than patients who had open<sup>2,6</sup>, laparoscopic<sup>2,3,5,9</sup> and vaginal<sup>3,5,6</sup> surgery.

## What else may happen?

Surgeons may be **less likely to switch** to an open procedure when doing a surgery with da Vinci, compared to a laparoscopic surgery.<sup>3,7</sup>

This means you will have **a few small incisions** compared to an open procedure and after surgery, a few small scars.



Get back to what matters most.

