



Laparoscopy – Information for Fertility Patients

What is a Laparoscopy?

A laparoscopy is a procedure, which involves a slim telescope, called a laparoscope, being inserted into the abdominal cavity. This allows the womb, tubes and ovaries to be thoroughly inspected by the surgeon. It requires admission to hospital as the test is performed under general anaesthetic usually as a day case procedure.

A small incision is made at the lower border of the umbilicus/navel and the abdominal cavity is then distended with carbon dioxide gas in order to create more space to accurately view the pelvic organs. The presence of adhesions, either around the tubes or tethering the ovaries can be easily detected and their significance assessed. Other pelvic problems, such as endometriosis and fibroids will also be visible.

Laparoscopy and Dye

If the laparoscopy is being performed because of subfertility, the tubes will be tested by injecting methylene blue dye into the womb through the cervix to check for any blockages or abnormalities. If the tubes are healthy the dye can be seen passing along them and spilling from their outer ends.

Ovarian Drilling Treatment

Ovarian drilling is a treatment, which is performed during laparoscopy. It is a procedure in which a diathermy needle punctures the ovary 4 to 10 times. This treatment may be performed for women who have polycystic ovary syndrome (PCOS). Studies have shown that up to 80 percent of patients will benefit from such treatment. Many women who fail to ovulate with Clomiphene or Metformin therapy will respond to ovarian drilling.

Before your admission

If on the day of admission to hospital your period is overdue, or you suspect you may be pregnant, please bring an early morning urine sample with you so that a pregnancy test can be performed. You should use barrier contraception to avoid the possibility of pregnancy during the month/menstrual cycle of your admission date. This date is normally chosen to avoid performing your laparoscopy during your period. If you anticipate having a period on that date please let us know so that an alternative date can be chosen.

After the Laparoscopy

After the laparoscopy, the doctor will speak to you about what was found. Because of the recent anaesthetic, your memory of this may be quite hazy the following day. A letter detailing the findings will be sent to your GP. The majority of patients are able to leave hospital the same day. You should rest for the remainder of the day and ensure someone is there to look after you. You will have two small abdominal wounds, which have stitches that will dissolve in approximately 10-14 days.

Information for Patients

You may have shoulder pain. This is caused by the gas used during surgery. The pain lessens if you lie flat and disappears as the gas is absorbed. This is a common effect that can be relieved by taking your prescribed pain relief tablets. You may have some vaginal bleeding for a few days and the next period will probably be 4-6 weeks after surgery. You will need a few days off work to allow the abdominal discomfort to settle and should not participate in strenuous exercise for a few days.

If you have any further questions or concerns please contact the Day Case Unit or:

Fertility Clinical Nurse Specialist
Good Hope Hospital 0121 424 9758
Solihull 0121 424 5859

Further information can be found at Royal College of Obstetricians & Gynaecologists:

www.rcog.org.uk/globalassets/documents/patients/patient-information-leaflets/recovering-well/laparoscopy.pdf

Resuming normal activity

- Take plenty of fluids in the first 24 hours (not alcohol)
- Do not operate machinery including cookers and kettles for 24 hours after your operation
- Avoid making important decisions or signing important documents for 24 hours
- You will need approximately one week off work following your operation, you can self certify for one week
- Do not drive for 48 hours after your operation
- Sexual activity may be resumed when it is comfortable for you