

ANALYSIS OF PROCEDURES MADE WITH HYSTEROSCOPIC MORCELLATOR IN OUR CENTER

Carla Henere, Glòria Ballber, Baldomero Arnau, Isabel Cayuela, Pilar Cristóbal, Àngels Vives

Obstetrics and gynecology, Consorci Sanitari de Terrassa, Spain

Introduction

In our center, diagnostic and surgical hysteroscopy are performed since 1995. From 2013 the use of Morcellator was introduced with the aim of making in the same act the diagnosis and treatment of the polyp, an outpatient basis and without requiring anesthesia.

Material and methods

Retrospective analysis of diagnostic hysteroscopy performed at our center with and without anesthesia. Hysteroscopies with Morcellator are indicated for the treatment of endometrial polyps larger than 1 cm.

Analysis

Between the years 2013-2016 there have been a total of 50 diagnostic hysteroscopy using this system, 47 corresponding to endometrial polyps anatomopathologically. These polyps had a size between 1-4 cm. Most polyps had an average size of 3 cm (31.25%).

The average age was 50 years.

After the intervention the pain scale (0-10) was asked to patients. The 51.28% of patients classified the pain between 0 and 2 during the intervention. A 25.64% referred pain at level 3.

Analyzing the complications in our sample only two complications were found: an injury in the vagina and an immediate postoperative pain that required intravenous analgesia.

Conclusions

Hysteroscopy with Morcellator allows us to perform in the same act the polyp diagnosis and treatment on an outpatient basis, simple and without anesthetic requirements.