VAULT CYTOLOGY AFTER HYSTERECTOMY CAN WE IMPROVE PRACTICE?

W. Parry-Smith, M. Underwood, E. Ismaili, L. Bangs, M. Kodampur, R. Todd, C. Redman

University Hospital of North Staffordshire, Stoke-on-Trent, UK

Background
The use of the vaginal vault cytology following hysterectomy is recommended for specific indications set out in national guidelines.

Objectives
To audit how many patients undergoing hysterectomy, under the care of the gynaecological oncology and two benign gynaecology consultants at the University hospital of North Staffordshire, had vault smear advice in their histology report and if indicated how adequate follow up was arranged. To devise a protocol based on local experience and national guidance.

Methods
The theatre register was searched and clinical, clerical and histological data collated.

Results
We identified 65 gynaecological oncology patients, mean age of 69 years. 92% had histology reports with advice. 83% of patients did not require follow up cytology. 33% of those requiring vault cytology were adequately followed up.

We identified 206 benign gynaecological patients, mean age of 55 years. 95% had histology reports with advice. 86% patients did not require follow up cytology. 35% of those requiring vault cytology were adequately followed up.

Discussion
A high proportion of cases complied with the national guidance to include vault cytology advice in the histology report, the majority of patients were not adequately followed up who required on going vault cytology.

Conclusion
Vault follow up of should rest with the team performing the surgery, appropriate communication with primary care and the patient should occur. The follow up should occur in secondary care. The protocol set out in this paper should be followed to avoid unnecessary clinical governance failings.