

Comparison of clinical and reproductive outcomes of women undergoing Cyto reductive procedure for diffuse Adenomyosis with patients undergoing myomectomy

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Abstract

It is well known that the incidence of Adenomyosis and uterine fibroids increases significantly with age. In times when the first pregnancy is postponed into the fourth or even fifth decade, there is a growing demand for fertility saving procedures for these uterine diseases. To date, the literature contains a limited number of reports describing the reproductive outcomes of patients after adenomyomectomy for severe diffuse adenomyosis, and no report has compared the reproductive, obstetrical, and surgical outcomes between the two different uterus-sparing surgical procedures, namely, adenomyomectomy and intramural myomectomy. Therefore, we have tried to investigate it. Two groups of women who underwent different fertility-saving procedures were compared. The pregnancy and delivery rates were 52.0% and 43.5%, respectively, in adenomyosis group versus 96.0% and 70.8%, respectively, in fibroid group, with no significant differences between the two groups, except for pregnancy rate. The perinatal outcomes of the groups were also comparable, including the low frequency of severe peripartum complications, such as the abruption or abnormal invasion of the placenta. The pregnancy rate was significantly lower in the group with severe form of adenomyosis. It appears, that the severity of the disease and the extent of the surgical resection of the uterus may influence the likelihood of a successful gestation. The clinical outcomes of women after cyto reductive resection of adenomyosis seems to be comparable with the different types of fertility sparing surgery on uterine muscularity, namely myomectomy. Despite the technical challenges resulting in longer operation times and a higher conversion rate in comparison with myomectomy, cyto reductive resection of adenomyosis seems to be a feasible option for women with severe adenomyosis and reproductive plans.

Biography

Kristyna Helenicka has got 10 years' experience in advanced laparoscopic deep endometriosis surgery and provide exemplary help to women suffering from it. I am also a sought-after specialist in fertility saving treatment of uterine myomas and adenomyosis. The Endoscopic Unit at the Department of Gynecology and Obstetrics of the General Faculty Hospital and the 1st Faculty of Medicine of Charles University is the largest setting for mini-invasive fertility enhancing procedures centralizing patients from all over the country. It carries out surgical interventions using highly specialised endoscopic techniques and is also very well equipped with highly advanced instruments. All members of our team are also highly educated ultrasound examiners with high level of ultrasound expertise.

Publications

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2nd International Meeting on Gynecology and Gynecologist
Webinar | January 20-21, 2022

Citation: Kristyna Helenicka, Comparison of clinical and reproductive outcomes of women undergoing cyto reductive procedure for diffuse Adenomyosis with patients undergoing myomectomy, Gynecology 2022, 2nd International Meeting on Gynecology and Gynecologist, Webinar | January 20-21, 2022, 2165-7920-12:04-05