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Radiofrequency volumetric thermal ablation of uterine leiomyomata: description and comparison with alternative treatment methods

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Statement of the Problem: The treatment of symptomatic benign fibroid tumors of the uterus (leiomyomata), has been a long-standing problem presenting to the practicing gynecologist. Concern with this condition relates to the association with multiple complaints (e.g. pelvic pain and menorrhagia), as well as diminished fertility. In recent years, a new modality of treatment has become available (Acessa®), utilizing radiofrequency energy (RF) delivered laparoscopically for their ablation.

Methodology: This retrospective cohort study looked at all cases of laparoscopic volumetric ablations of uterine leiomyomata performed at Advocate Illinois Masonic Medical Center from July 1, 2013 through June 30, 2016. All cases of excisional removal of uterine leiomyomata (hysteroscopically, laparoscopically or via laparotomy) performed during this same time period were analyzed, so a comparison could be made.

Results: From July 1, 2013 through June 30, 2016, there were 112 patients that underwent Acessa therapy as treatment of uterine myomata, and 637 patients that were treated with excision of the fibroid(s). Concomitant thermal endometrial ablation was performed in 25 of the Acessa cases and in 29 of the non-Acessa cases. In six of the Acessa cases, hysteroscopic myomectomy was additionally performed, which was a procedure included in the non-Acessa group. During this time period, there was one readmission in each group, with the one in the Acessa group being admitted on the same day of surgery for nausea and vomiting which soon resolved. There were no surgical site infections and no transfusions given in Acessa group of patients. In the non-Acessa group, there was one readmission for a surgical site infection (after an open myomectomy), and three cases of organ injury, and five cases of blood unit transfusion. Except for the average duration of surgery, a statistical difference was not demonstrated.

Conclusions: The functional results achieved in this investigation, and the minimal complications encountered, makes this described technique particularly attractive. Application of this innovative technology for treatment of the common problem of uterine myomata can be appropriately accepted.