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Usage, development & effectiveness of a new surgical technique for the treatment of severe adenomyosis

Advised treatment of the severe forms of adenomyosis is hysterectomy but for the patients those who want to preserve their uterus, conservative surgery named adenomyomectomy for removal of endometrial tissue from the myometrium can be performed. This technique must be developed for reduction of the spontaneous uterine rupture, adhesions and recurrence rate. So, this study is to investigate the safety and therapeutic outcomes of different and novel adenomyomectomy technique. Prospectively, 103 Iranian patients with documented severe adenomyosis were candidates for adenomyomectomy over a period of 7 years (April 2004-March 2011). The surgical procedure is the resection of adenomatous lesions with the thin (0.5 cm) margin, wedge shaped in two sides of the uterus wall, with sagittal incision on the body of the uterine and reconstruction of the layers and inverted suture for the serosa layer ends. Out of 103 patients, 57 cases (55.34%) were presented with infertility, 17 cases (16.5%) with IVF failure, 9 cases (8.74%) with recurrent abortion and 20 cases (19.42%) with abnormal vaginal bleeding (AUB). Out of 70 patients that wish to bear child, 21 persons (30%) became pregnant spontaneously (7 cases) or by ART technique (14 cases) and 16 pregnancies became full term and candidates for cesarean section (C/S). There was a significant reduction in both dysmenorrhoea and hypermenorrhoea. Only one case had relapsed adenomyosis. Adenomyomectomy is the conservative and effective option on treatment of adenomyosis. The described procedure in this study can be an efficient procedure for the treatment of severe adenomyosis.

Biography

Abo Taleb Saremi obtained his MD from Jondishapour and Tehran Universities, Iran in 1975. He was trained at the Obstetrics and Gynaecology Department of Munster University, Germany, took a subspecialty in IVF at Vienna University, Austria from 1981 to 1986 and then participated in complementary assisted reproduction courses in the USA and Australia. His specialization includes laparoscopic surgery and his work lead to the birth of the first Iranian assisted reproduction child (by gamete intra-Fallopian transfer) in 1989. He founded his first IVF centre in Iran in 1993 and received the International Federation of Fertility Societies' 30th anniversary recognition award in 1998. He is the President of the Sarem Women's Hospital, which he founded in 2006, and the Sarem Cell Research Center.

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