

A hysterectomy is a surgical procedure that removes a woman's uterus, either with or without the cervix. Many people think that a hysterectomy means removal of the ovaries too. This is not usually the case, particularly if you are premenopausal. Having your uterus removed means that you will no longer menstruate every month.

Having a hysterectomy is a big decision, and one you should thoroughly discuss with your family and surgeon. Technology is changing rapidly and allowing patients to regain function more quickly and get back to their lives sooner. Make sure you do some research and come ready to discuss treatment options with your health care provider. Please call our office for an appointment to discuss this procedure with a medical doctor.

Why is it done:

- Uterine fibroids that cause heavy bleeding, painful periods, bulk symptoms, or pain with intercourse
- Dysfunctional bleeding – irregular bleeding not improved with medicines
- Endometriosis/Adenomyosis (endometriosis of the uterus)
- Heavy monthly bleeding
- Chronic pelvic pain
- Cancer of the uterus, cervix, ovary or fallopian tubes
- Prolapse symptoms
- Infection – such as chronic PID

A hysterectomy may be done thru the vagina, abdominally or laparoscopically. The type of hysterectomy performed is dependent on many factors including:

- Number of previous children and how they were delivered – vaginal versus cesarean section
Size of the uterus and the patient
 - Presence of cervical dysplasia such as a current abnormal pap smear showing active HPV infection
 - History of previous pelvic surgeries/history of adhesions
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