

Having an abdominal hysterectomy

Your specialist has recommended that you have a hysterectomy and this leaflet provides some standard information and advice about the procedure. However, you should always follow the instructions of your own specialist.

If you have any unanswered questions or concerns, please do not hesitate to ask your specialist or nurse for more information. It is natural to feel anxious, but often knowing what to expect can help.

What is hysterectomy?

A hysterectomy is a commonly performed operation to remove the uterus (womb). The procedure may also involve removal of one or both of the fallopian tubes and one or both of the ovaries, depending on the condition that is being treated.

A hysterectomy usually requires a hospital stay of around five days.

About the operation

For an abdominal hysterectomy, the uterus is removed through an incision in the lower abdomen. This incision is either horizontally just above the pubic bone (around the top of a bikini brief) or vertically from just below the umbilicus (belly button) down to the pubic bone.

The operation routinely lasts about an hour. It is usually performed under general anaesthetic, which means you will be asleep during the procedure. If you would like more information about general anaesthesia, please see a separate leaflet.

Preparing for your operation

Once at the hospital, you may be asked about your medical history and any previous experience of hospital treatment. Your answers will help them in planning your care whilst you are in hospital.

Before you come into hospital for your hysterectomy, you will also be asked to:

- have a bath or shower on the day of your admission
- remove any rings, make-up or nail varnish. Rings and earrings that you'd prefer not to remove can usually be covered with adhesive tape
- go without food for six hours before the operation. You can usually take sips of water until two hours before. More specific advice will be given in your admission confirmation letter

When you arrive at the hospital, a nurse will explain how you will be cared for during your stay. The surgeon and anaesthetist will also visit you. This is a good time to ask any outstanding questions about your treatment.

The nurse will help you prepare for theatre. You may be asked to put on support stockings to help maintain the blood flow in the veins of your legs. These will feel tight, but they do help prevent blood clots.

Consent

Before going to theatre you will be given a consent form to sign. By doing this, you confirm that you understand what the procedure involves, including the benefits and risks, and give your permission for it to go ahead.

Please see the back of this leaflet for further information about the possible side-effects and complications of this procedure. You need to know about these in order to give your informed consent.

What are the risks?

Hysterectomy is a commonly performed procedure. For most people, the benefits in terms of improved symptoms are greater than the disadvantages. However, all surgery does carry some element of risk. This can be divided into the risk of side-effects and the risk of complications.

Side-effects

These are the unwanted but mostly temporary effects of a successful treatment. Common side-effects of hysterectomy include some pain and discomfort. There may also be some bruising around the lower abdomen. Feeling or being sick as a result of the anaesthetic or painkillers is also quite common, although medicines are available to help avoid this.

In the longer term, a hysterectomy may decrease your sex drive, especially if your ovaries are removed. It's worth discussing this with your doctor so that you know what to expect and get advice about possible treatments, including hormone replacement therapy.

Complications

This is when problems occur during or after the operation. They are much rarer than most side-effects.

The possible complications of any operation include an unexpected reaction to the anaesthetic or developing a blood clot, usually in a vein in the leg (deep vein thrombosis). The complications specific to a hysterectomy are excessive bleeding during or soon after the operation, infection, and damage to other organs and tissues in the abdomen. These complications may require further treatment such as returning to theatre to stop bleeding or antibiotics to deal with an infection. The chance of complications depends on the exact type of operation you are having and other factors such as your general health. You should ask your surgeon to explain how these risks apply to you.

After your operation

You will be taken from the operating theatre to a recovery room, where you will come round from the anaesthetic under close supervision.

After this, you will return to your room, where a nurse will make you comfortable. She will assess the operation site and monitor your blood pressure and pulse at regular intervals. You will be wearing a sanitary towel to absorb any vaginal bleeding, which is usually similar to a light period.

You will have a catheter in place after surgery as most women experience temporary difficulty passing urine after this procedure. The catheter drains urine out of the bladder and into a bag beside your bed. After abdominal hysterectomy, you may also have tubes running from under the skin in the area of the operation. These drain any fluid out of the operation site into another bag or jar. You will also find a drip in your arm to keep you hydrated. This will be removed when you've started drinking enough fluid.

Recovery

You will need to rest until the effects of the general anaesthetic have passed. Your surgeon will visit you to answer any questions you have about the operation.

The anaesthetist will prescribe painkillers for the first few days after the operation. Suffering from pain could slow down your recovery, so please discuss any discomfort you have with your doctors or nurses.

When you feel ready, you can begin to drink and eat, starting with clear fluids such as water or apple juice.

The catheter will usually be removed within 48 hours. You may experience some discomfort to begin with, such as the constant urge to urinate and some dribbling. This should pass within 24 hours.

You may find that you don't open your bowels for up to five days after the operation, but should avoid straining when you go to the toilet. If you need them, laxatives can be provided. Your nurse will advise you about getting out of bed, bathing, diet and gentle exercises.

The clips or stitches that seal the incision on your lower abdomen will be removed on around the fifth day following the operation.

Physiotherapy

If required, a physiotherapist will visit you in the first few days after your operation to discuss gentle exercises that you can do at home. These will help speed up your recovery. The physiotherapist will provide further information materials for you to take home.

Going home

On discharge, the nurse will advise you on caring for the stitches, hygiene and bathing.

You will be given a contact telephone number for the hospital and a date for a follow-up appointment with your surgeon. This will be about six weeks later.

After you return home

You will need to take it easy and should expect to tire easily to begin with. Avoid strenuous exercise and lifting. You shouldn't drive until you feel confident that you could perform an emergency stop without discomfort - probably no less than three weeks after your operation.

At your follow-up appointment, your surgeon will advise you when you can resume your other normal activities, including sport and sexual intercourse. A full recovery can take up to twelve weeks.

Further information

National Women's Health Information Center

<http://www.4woman.gov/faq/hysterectomy.htm>

WebMD

<http://my.webmd.com/encyclopedia/article/1840.52431>

American College of Surgeons

http://www.facs.org/public_info/operation/hysterectomy.pdf

Hysterectomy Educational Resources and Services (HERS)

<http://www.hersfoundation.com/>

Healthwise (Health Information Resource Centre)

Tel : (852) 2849 2400

Fax : (852) 2849 2900

Email : info@healthwise.org.hk

Homepage : www.healthwise.org.hk

This leaflet is for information only. For a detailed opinion or personal advice, please consult your own doctor.

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