Robotic Abdominal Sacrocolpopexy with possible removal of ovaries (Robotic assisted Laparoscopic Reconstruction)

What is a Robotic Abdominal Sacrocolpopexy with possible removal of ovaries?

The top of the vagina is supported by a mesh with stitches that are attached to the front of the tail bone (sacrum). If necessary a vaginal repair of the bladder and bowel might also follow this procedure.

When is this procedure done?

- Chronic discomfort from bulging from prolapse/ fallen vagina
- Chronic constipation
- Difficulty emptying the bladder

How is the surgery performed?

The surgery is a minimally invasive surgery performed by through four small openings on the abdomen (see picture below). The top of the vagina is then supported by attaching mesh with stitches to the front of the tail bone (sacrum), (see picture below). If a bulge in the vaginal still remains, a vaginal repair can be done. The mesh and sutures used are permanent, but will not need to be removed.

Where is the surgery performed? Will I need to stay in the hospital?

This procedure is an inpatient surgery (you will stay in the hospital for 1 day) performed at the University of Virginia Medical Center Main Operating Room (second floor Main Hospital).

What are possible risks from this surgery?

- Bleeding
- Infection
- Mesh erosion
- Damage to bowel
- Pain with intercourse
- Difficulty with bowel movements
- Failure of the surgery
- Rare risks include:
  - Blood clot in the legs or lungs
  - Complications from anesthesia

What will be the recovery time for a Robotic Abdominal Sacrocolpopexy?

Typical recovery for the procedure is 2-3 weeks. During the first week you will likely need to take pain pills which will likely make you feel tired and sleepy.

Advantages or disadvantages of a robotic laparoscopic reconstruction?

Advantages of robotic laparoscopic reconstruction procedures are:

- Smaller incisions than abdominal surgery (see picture below), decreased blood loss, less pain, and quicker healing time.
- Recent studies support that the procedure is as effective as abdominal reconstruction which is a more durable /strong repair when compared with vaginal reconstruction. Your surgeon will discuss other risks of your planned surgery with you.

Disadvantages include:

- Less evidence of the effectiveness of the procedure as compared to vaginal and abdominal reconstruction
- Newer procedure

How do I prepare for surgery?

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- If you have any medical problems, make sure that you are cleared for surgery (medicine or anesthesia). Make sure you have all the necessary lab work, EKG, or chest x-rays done at least 3 days before surgery.
• Make sure your physician knows what medications, including herbal supplements, you are currently taking. Some medications need to be stopped for some time before the procedure:
  - Coumadin
  - Plavix
  - Heparin
  - Lovenox
  - Motrin or Ibuprofen
  - Aspirin
  - Metformin
  - St. John’s Wort

• Smoking can affect your recovery. Smokers heal more slowly after surgery and may have difficulty breathing during the surgery. If you are a smoker, it is best to quit 6-8 weeks before surgery.

**Do I have any limitations afterwards?**

**Walking:** Normal physical activity is expected within hours of your procedure. Start with short walks and gradually increase the distance and length of time that you walk.

**Climbing:** Climbing stairs is permitted, but you may require some assistance initially.

**Lifting:** Please limit lifting to anything less than 10 pounds (2 one gallon containers) for 4-6 weeks.

**Showers:** Showers are allowed within 24 hours after your surgery. Refrain from baths for at least 1 week.

**Driving:** Driving may be resumed 3-5 days after surgery, but be careful if taking prescription pain medications.

**Sex:** Sex may be resumed 6 weeks after surgery.

**Work:** Most patients will be able to return to work between 2-3 weeks after surgery. Some patients may have residual fatigue for a couple of weeks.

**Diet**
No dietary restrictions unless diabetic. Regular food as tolerated.

**Medications**

**Pain:** A pain medication will be prescribed for you after surgery. Do not take more frequently than indicated on the instructions.

**Stool softener** A stool softener will be needed while taking prescription pain medications.

**How long after surgery do I come back to Follow-up?**
Before you leave the hospital you should have a post-operative appointment made with your physician between 4-6 weeks after surgery.