Considering Surgery for Uterine Fibroids?

Learn about minimally invasive da Vinci Surgery
The Condition: Uterine Fibroids

A uterine fibroid is a benign (non-cancerous) tumor that can grow inside and outside the uterus. Uterine fibroids are most common in women ages 30 to 40, but can occur at any age.\(^1\) An estimated 20 to 80% of women develop fibroids by age 50.\(^2\) Uterine fibroids are the most common reason a hysterectomy is performed.\(^2\)

Uterine fibroids can grow as a single tumor or in clusters. They may increase in size and frequency with age, but may shrink after menopause. Not all women experience symptoms due to fibroids. When symptoms are present, they can include heavy menstrual bleeding, pelvic pain, frequent urination and difficulty getting pregnant.

Uterus shown with five types of fibroid tumors. The tumors are named for their location relative to the uterine wall.
When medication, lifestyle changes and other non-invasive treatments do not ease your symptoms, your doctor may recommend surgery. Myomectomy is an alternative to hysterectomy for treating fibroids. During myomectomy, your surgeon removes the fibroid tumor(s) while leaving your uterus in place. Myomectomy is recommended for women who want to become pregnant or keep their uterus for other reasons.

Myomectomy can be performed using traditional open surgery, meaning a large incision is made in the lower abdomen. The incision must be large enough for your surgeon to fit his or her hands and...
surgical instruments inside your body and reach your uterus. Open surgery allows your surgeon to see and touch your organs.

Laparoscopic surgery is a minimally invasive alternative to open surgery. With laparoscopy, doctors operate through a few small incisions with long-handled instruments and a tiny camera. The camera sends images to a monitor which guides doctors as they operate. Another minimally invasive surgical option for women considering myomectomy is *da Vinci* Surgery.
da Vinci Surgery: A Minimally Invasive Surgical Option

If your doctor recommends surgery, ask about da Vinci Myomectomy. With da Vinci, surgeons operate through a few small incisions - similar to traditional laparoscopy. The da Vinci System features a magnified 3D HD vision system and wristed instruments that rotate far greater than the human wrist. These features enable surgeons to operate with enhanced vision, precision, dexterity and control.

As a result of da Vinci technology, da Vinci Myomectomy offers the following potential benefits over open surgery:

- Less blood loss³,⁴,⁵
- Shorter hospital stay³,⁴,⁵,⁶
- Less narcotic pain medicine required⁶
- Small incisions for minimal scarring

As a result of da Vinci technology, da Vinci Myomectomy offers the following potential benefits compared to traditional laparoscopy:

- Greater likelihood your surgeon can remove heavier fibroids³
- Fewer complications during surgery⁷

Risks & Considerations Related to Myomectomy & da Vinci Surgery:
Potential risks of any myomectomy procedure include:
- Scar tissue
- Weakening of uterus during labor
- Pre-term birth
- Tears in uterine wall

In addition to the above risks, there are risks related to minimally invasive surgery, including da Vinci Myomectomy, such as hernia (bulging tissue at incision site) and pulmonary embolism (blocked lung artery).³
Important Information for Patients:

All surgery presents risk, including da Vinci Surgery. Results, including cosmetic results, may vary.

Serious complications may occur in any surgery, up to and including death. Examples of serious and life-threatening complications, which may require hospitalization, include injury to tissues or organs; bleeding; infection, and internal scarring that can cause long-lasting dysfunction or pain. Temporary pain or nerve injury has been linked to the inverted position often used during abdominal and pelvic surgery. Patients should understand that risks of surgery include potential for human error and potential for equipment failure. Risks specific to minimally invasive surgery may include: a longer operative time; the need to convert the procedure to other surgical techniques; the need for additional or larger incision sites; a longer operation or longer time under anesthesia than your surgeon originally predicts. Converting the procedure to open could mean a longer operative time, long time under anesthesia, and could lead to increased complications. Research suggests that there may be an increased risk of incision-site hernia with single-incision surgery. Patients who bleed easily, have abnormal blood clotting, are pregnant or morbidly obese are typically not candidates for minimally invasive surgery, including da Vinci Surgery.

Other surgical approaches are available. Patients should review the risks associated with all surgical approaches. They should talk to their doctors about their surgical experience and to decide if da Vinci is right for them. For more complete information on surgical risks, safety and indications for use, please refer to http://www.davincisurgery.com/safety.
Your doctor is one of a growing number of surgeons worldwide offering da Vinci® Surgery.

For more information and to find a da Vinci surgeon near you, visit: www.daVinciSurgery.com

The Enabling Technology: 
*da Vinci* Surgical System

The *da Vinci* Surgical System is designed to provide surgeons with enhanced capabilities, including high-definition 3D vision and a magnified view. Your doctor controls the *da Vinci* System, which translates his or her hand movements into smaller, more precise movements of tiny instruments inside your body.

Though it is often called a “robot,” *da Vinci* cannot act on its own. Surgery is performed entirely by your doctor. Together, *da Vinci* technology allows your doctor to perform routine and complex procedures through just a few small openings, similar to traditional laparoscopy.

The *da Vinci* System has been used successfully worldwide in approximately 1.5 million various surgical procedures to date. *da Vinci* - changing the experience of surgery for people around the world.