

### Background and Aims

- Laparoscopic myomectomy (LM) is a high needs surgery due to factors such as social background.
- However, this surgery has a high degree of difficulty.
- Even in technique is high operator, there is a case to be encountered in a large amount of blood loss.
- If we can predict the amount of bleeding before surgery, it is possible to safer surgery such as preparation of autologous blood donation and recovery.
- We examined the factors that increase the amount of bleeding in LM.
- Myomectomy for uterine fibroids tends to cause more blood loss. We examined the safety of laparoscopic myomectomy.

### Methods

- A retrospective analysis of surgical outcomes was conducted for 1096 cases in Jan 2008 to Apr 2016 in our hospital.
- All gynecologic abdominal surgeries in our hospital are performed with four ports of the right parallel method.
- A camera port of 12 mm was inserted into the navel, a 5-mm port is inserted into both flanks, and a 5-mm or 12-mm port is inserted into the right groin. Although multiple surgeons were involved in this study, the main surgical procedures were the same.

### Results

Table1: Demographic and Clinical Characteristics and Surgery results of LM:1096 cases

	Median [first to third quartiles] (range)
Age	38 [34 - 40] (21 ~ 51)
Gravid	0 [0 - 1] (0 ~ 6)
Pality	0 [0 - 0] (0 ~4)
Myome size (cm)	7 [ 3 - 9] (1 ~ 20)
Number of myoma	3 [3 - 7] (1 ~ 29)
Operating time (min)	95 [77 - 115] (28 ~ 255)
Blood loss(mL)	100 [10 - 237] (0 ~ 2190)
Myoma weight (g)	225 [76 - 395] (1 ~ 1987)

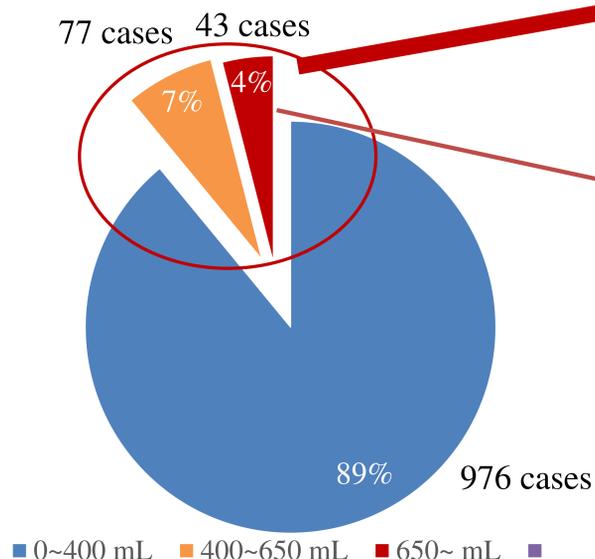


Fig1: Distribution of the blood loss of 1096 cases

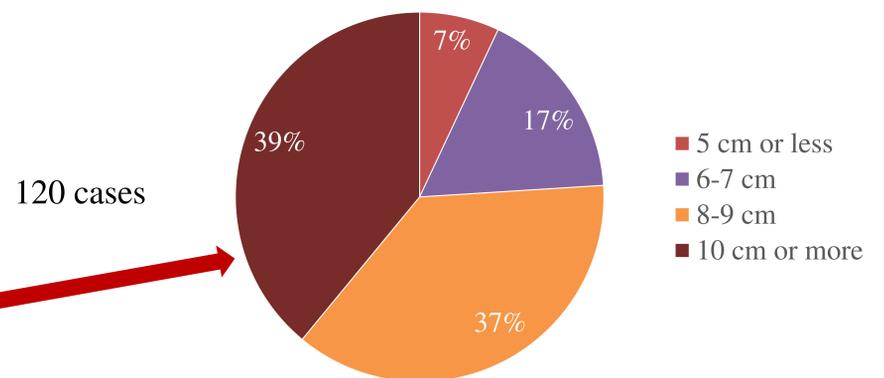


Fig2: The size of myoma which the intraoperative blood loss was 650 mL or more.

43 cases

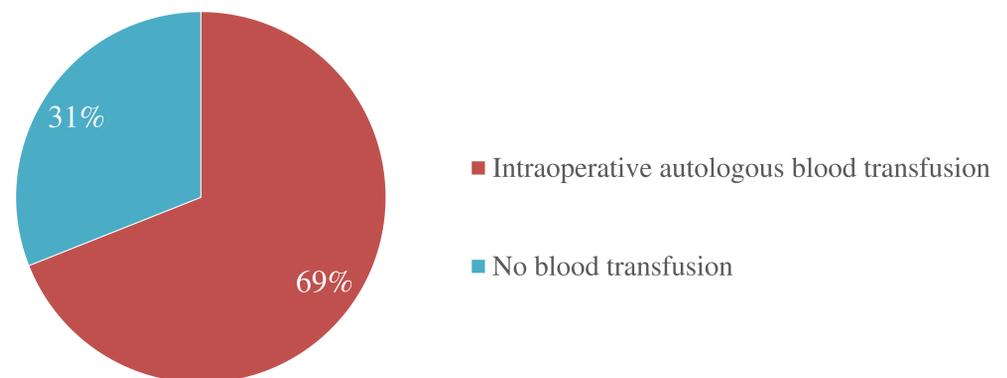


Fig3: Percentage of autologous blood transfusion in 43 patients with intraoperative blood loss of 650 ml or more

### Conclusions

- In cases where laparoscopic surgery was deemed possible, more than 95% of cases did not require blood transfusion.
- If a recovery autologous blood transfusion device could be prepared at the time of bleeding, allogeneic blood transfusion could be avoided by returning the collected blood in a timely manner.

### Disclosure of Conflict of Interest

I have no COI with regard to our presentation.

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