Gynaecology, Obstetrics, Infertility Advanced Laparoscopic Surgery





Minor Vaginal Procedures

General

The following notes cover minor vaginal procedures such as excision of skin tags/ lumps and bumps, hymen repair, excision of Gartner's Duct cyst, hymenectomy and hymenotomy, repair of labial tear.

Your proposed procedure:

Anaesthetic

A general (sleeping) anaesthetic is required. You will be required to fast for around six hours. Please check with my secretarial staff if you are not sure when to fast from. Some patients, depending on the medical condition and associated conditions, may need blood tests, imaging studies or other investigations to be performed. All these procedures can usually be performed during a patient's period. It is important to give Dr. Thomas a full list of your medications prior to the procedure. This also includes natural therapies, herbal preparations and fish oil tablets, which may have an unpredictable effect on the blood's ability to clot.

Duration of Procedure

Around 30 minutes depending on your condition and the extent of surgery required.



Post-Procedure Care

After leaving the operating theatre you will usually have a drip or intravenous line in-situ. This is to maintain your hydration, as you will have been fasting for a period of hours prior to the procedure. You will be cared for in the Recovery area of the Operating Theatre, which involves one on one care by a specialist member of the nursing staff. This is to monitor for excessive bleeding or other complications and allows time for recovery after the anesthetic. After around one to two hours you will be offered something to eat or drink if appropriate, will be able to change back into your street clothes and arrangements for discharge will be initiated.

Post-Discharge Care

Most patients should be able to resume their regular activities within one to two days. Mild discomfort and spotting may occur over a few hours or days. Pain can be treated with non-steroidal anti-inflammatory medications such as Naprogesic or Nurofen in combination with Panadol, Panadeine 8 or 15. See my website www.philipthomas.com.au (analgesic guidelines) for detailed advice regarding pain relief. It is wise to avoid tampons and to refrain from intercourse. Bathing is allowed but swimming in public pools should be avoided. The next menstrual period occurs at the usual time. Avoid heavily perfumed soaps; gentle sponging with a soap-free gel and tepid water is generally all that is required. Do not apply antiseptic creams/ Dettol/ Betadine unless directed by me. Dizziness or loss of concentration may be due to the anaesthetic or analgesics, especially those such as Panadeine. Avoid operating machinery or making important decisions for at least 4 or 5 days.

Healing and the immediate post-operative phase

Whether you stay just the day or overnight depends principally on the extent of the surgery required (determined by careful pre-operative assessment), the individual's response to the anaesthetic and need for pain relief. Healing is achieved in the body by an inflammatory response, which is maximal at around 7-10 days, so discomfort and swelling may increase for a few days.

Bleeding

You may have some spotting, usually less than a period, which will settle prior to discharge from hospital, but may continue for some days. Heavier or recurrent bleeding is usually due to infection by bacteria, which normally inhabit the perineum/vagina, or rarely due to discharge of a collection of blood from the area of the repair (haematoma). If you are bleeding heavily or passing clots please notify me via the call service. Antibiotics are administered during your operation in order to help prevent infection, but this may still occur later in a small percentage of women.

Diet

Your appetite and possibly your senses of smell and taste will be disturbed for a while. Maintain a sensible light diet and fluid intake.

Complications

This surgery is classified as minor and complications are rare. Infection is rare however if you experience a marked increase in pain and swelling that doesn't respond to simple analgesics, malodorous discharge or feel feverish, please contact me. Wound infections may occur in about 4% of "clean" wounds, or 2% after preventative antibiotics are given. After healing has occurred there is always some slight degree of asymmetry, i.e., difference between the two sides after healing has occurred. The scar may be a little lumpy. Sex may be uncomfortable for a while.

Follow-up

At postoperative check I will generally perform an examination to check for healing. Queries may be directed to my rooms on 03 9530 8131; after hours or urgent queries should be directed to my call service on 9387-1000. Your stitches DO NOT need to be taken out. They will dissolve over a period of weeks.