

FIGO Tip3 Miyomun Histeroskopik Rezeksiyonu

Op.Dr. Aysel Nalçakan

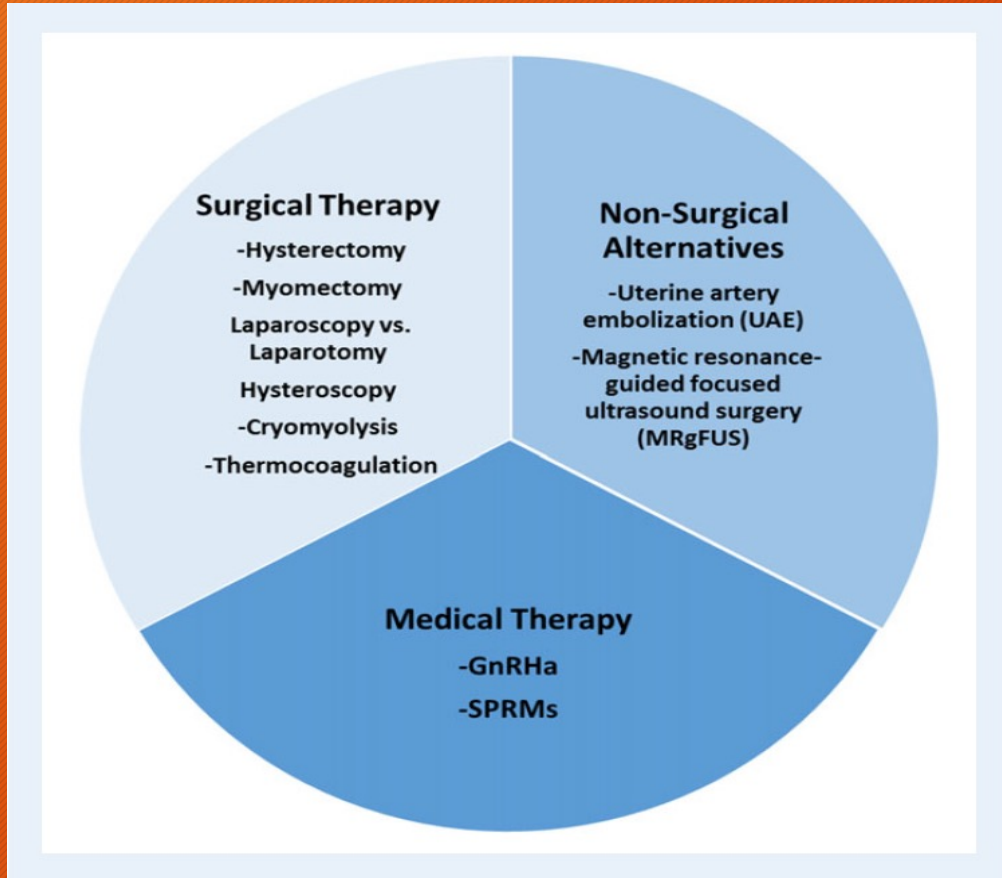
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Myoma Uteri

- Benign uterin tümörlerin en sık görülen formu
- Uterin düz kastan köken alan monoklonal tümör
- Kadınların %50-60
- Hastaların yaklaşık % 25-50 'sinde tedavi gerektiren semptomlar oluşur

Güncel Tedavi Seçenekleri

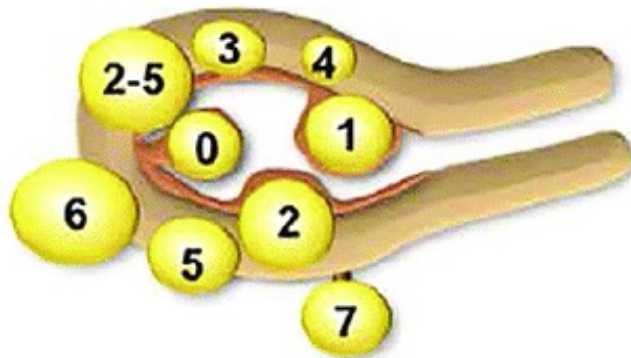


Kişiyeye Özgü Tedavi

- Semptomatoloji
- Myomun boyutu / yeri
- Yaş
- Fertilitenin korunması gereği / hastanın isteği
- Uterusun korunması gereği / hastanın isteği
- Uygulanabilirlik
- Hekim tecrübesi

FIGO Klasifikasyonu

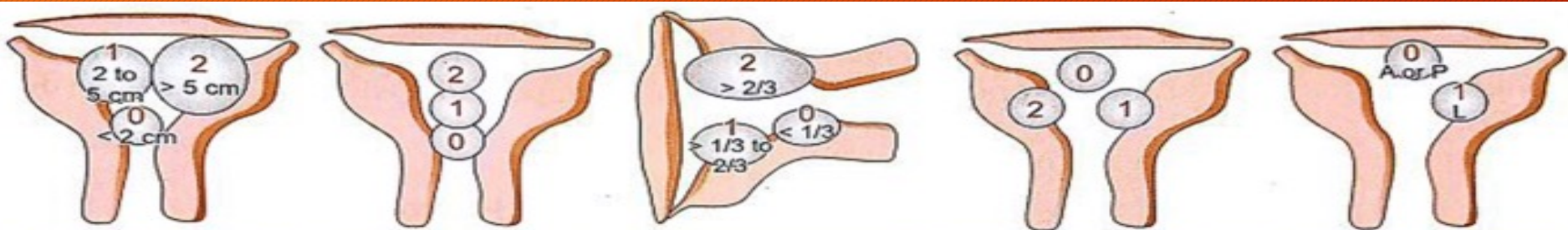
Leiomyoma Subclassification System



S – Submusosal	0	Pedunculated intracavitary
	1	< 50% intramural
	2	≥ 50% intramural
O – Other	3	Contacts endometrium; 100% intramural
	4	Intramural
	5	Subserosal ≥ 50% intramural
	6	Subserosal < 50% intramural
	7	Subserosal pedunculated
	8	Other (specify e.g. cervical, parasitic)

Hybrid leiomyomas (impact both endometrium and serosa)	Two numbers are listed separated by a hyphen. By convention, the first refers to the relationship with the endometrium while the second refers to the relationship to the serosa. One example is below	
	2-5	Submusocal and subserosal, each with less than half the diameter in the endometrial and peritoneal cavities, respectively.

STEP-W Klasifikasiyon



	Size (cm)	Topography	Extension of the base	Penetration	Lateral wall	Total
0	<2	Low	<1/3	0	+1	
1	>2-5	Middle	>1/3-2/3	<50%		
2	>5	Upper	>2/3	>50%		
Score	+	+	+	+	+	

Score	Group	Complexity and therapeutic options
0 to 4	I	Low complexity hysteroscopic myomectomy
5 to 6	II	High complexity hysteroscopic myomectomy Consider GnRH use? Consider two-step hysteroscopic myomectomy
7 to 9	III	Consider alternatives to the hysteroscopic technique

Tip 3 Myomlar

Intramural myomas more than 3–4 centimeters should be surgically removed before in vitro fertilization

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Hysteroscopic type 3 myomectomies can be safely accomplished with a bipolar resectoscope and transabdominal ultrasound guidance. Tissue shavers with side opening blades are not designed for this type of dissection. Because there are no abdominal incisions with the hysteroscopic approach, the patient can return to normal activities in 24 hours as opposed to the typical 2–4 weeks with a laparoscopic approach.

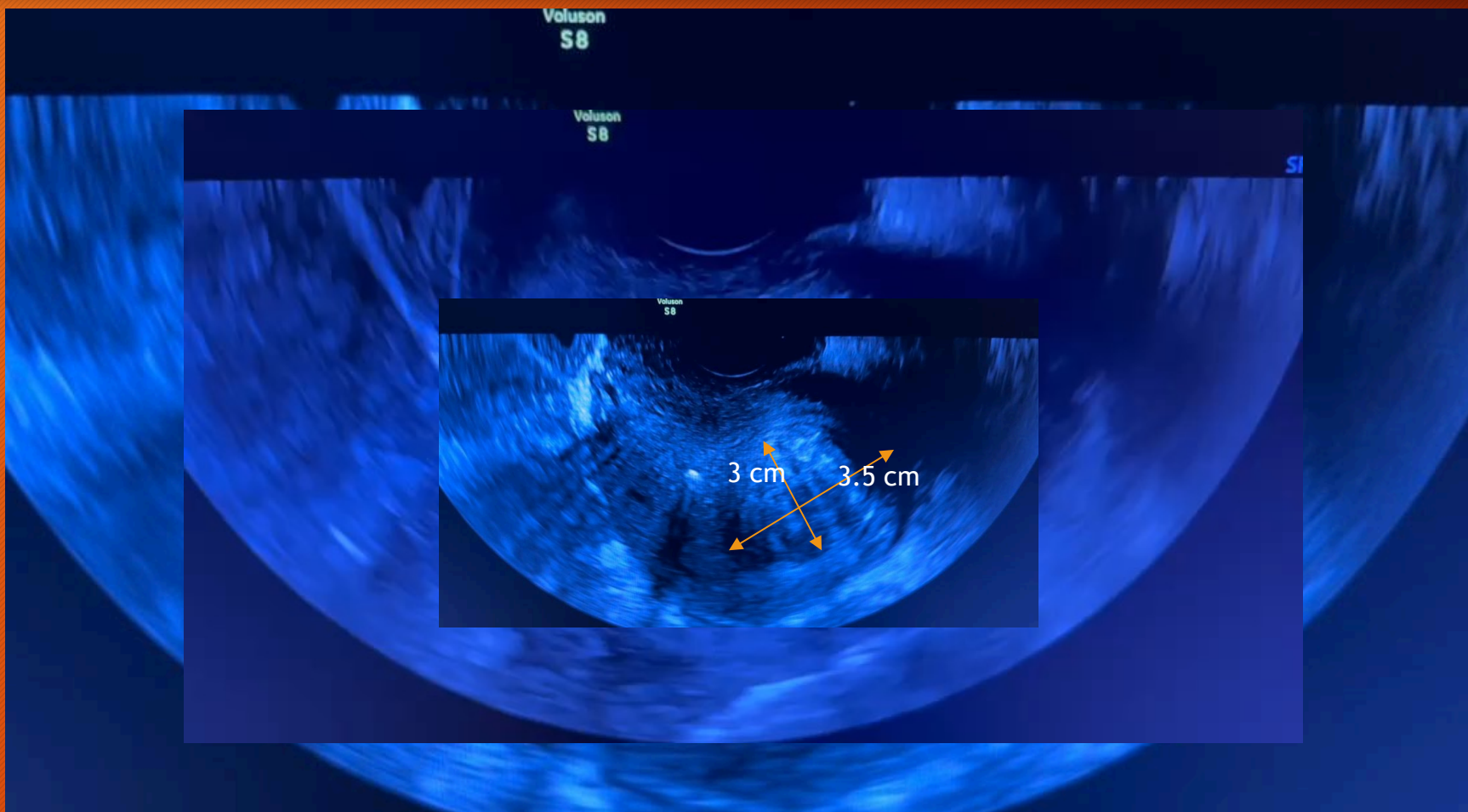
FIGO Tip 3 Myom (2-4 cm)

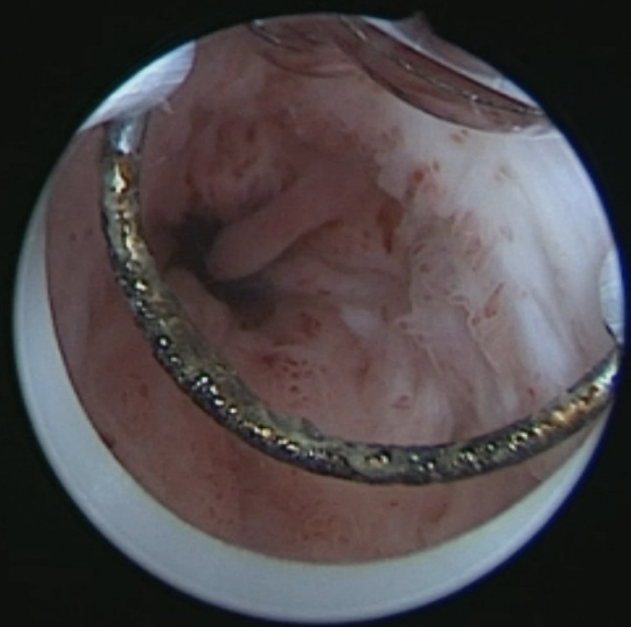


Olgu

- 38 yaşı, G2P2Y2 C/S*2
- Anormal uterin kanama
- Dış merkezde LNG-IUS uygulanmış, medikal tedaviye dirençli kanama+
- Fertilite Arzusu+

Ultrason





- Hasta 1 ha
- Ultrasonda
- Pipelle ka



Dikkatiniz için
Teşekkürler...