

Post Laparoscopy Pain Reduction Project (POLYPREP): Intraperitoneal Normal Saline Infusion (INSI) and Pulmonary Recruitment Manoeuvre (PRM); in combination VS INSI: A Randomised Controlled Trial

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ABSTRACT

Introduction: Laparoscopic surgery advocates shorter hospital stay, lower rate of wound complication, less postoperative pain. However, post laparoscopic shoulder pain (PLSP) remains significant. Its pathophysiology is not fully understood. Amount of residual CO₂ is significantly correlated to PLSP. Pulmonary recruitment manoeuvre (PRM) and Intraperitoneal normal saline infusion (INSI) is shown to be affective to reduce PLSP. **Objectives:** To identify the most effective preventive measures for PLSP. INSI vs PRM+INSI **Methods:** Randomised controlled trial, single blinded study, study population were women undergoing elective benign laparoscopic gynaecological surgery in UMMC. **Results:** No significant difference in the severity and incidence of PLSP between INSI and (INSI+PRM). No difference in the incidence of nausea and vomiting in both groups. None experienced vomiting after day-2 post operation. The combination of INSI & PRM demonstrates a lower incidence of abdominal distension which suggests that additional PRM had further reduced the residual pneumoperitoneum. **Conclusions:** Combination of PRM and INSI does not show synergistic effects in post laparoscopic shoulder pain reduction. INSI alone shows a lower incidence and severity in PLSP with no serious adverse effects. Routine use of combine intervention is not recommended.

Tackling the Large and the Broad Ligament Fibroids: The Laparoscopic Algorithm

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ABSTRACT

Introduction: Laparoscopic surgery advocates shorter hospital stay, lower rate of wound complication, less postoperative pain. Most myomectomies are still approached abdominally due to complexity and necessity of extensive suturing for uterine closure. The MIS selection very much predetermined by the myoma characteristics and surgeon expertise. **Objectives:** To display the algorithm which will assist surgeons to predetermine suitability for laparoscopic approach of large fibroids including rare but still found broad ligament fibroids. **Methods:** Video will discuss cases in a series as well as share tips and tricks of surgical management. **Results:** Successful surgeries with good outcome. **Conclusions:** Laparoscopic myomectomy (of big fibroids and broad ligament ones) can be managed quite feasibly when an algorithm is in place. This is beneficial for patients who wish to preserve their reproductive potential.