



Laparoscopic supracervical hysterectomy (LSH) uses a thin, lighted telescope-like instrument called a laparoscope, which acts like a video camera, along with small surgical instruments that are all inserted through three to four tiny incisions (less than 1/4 inch each) in the navel and abdomen. Using the instruments, the surgeon carefully separates the uterus from the cervix and removes it through one of the openings. The cervix, the bottom part of the uterus, is left intact. Because this type of surgery does not require the surgeon to make a large abdominal incision, you will not have the same kind of visible scar typical with most traditional, "open" surgeries.

LSH causes less stress to the body than the traditional "open" hysterectomy. It was developed to reduce pain, minimize scarring, and shorten recovery time. The procedure can be done on an outpatient basis, which means a woman can be home resting comfortably within 24 hours and back to her normal activities in less than a week. As with all surgery, hysterectomy involves risk, including potential blood loss, infection and damage to other internal organs.

LSH preserves the cervix, which some research suggests may help to reduce the risk of pelvic floor prolapse, urinary incontinence and other complications associated with total hysterectomies. Because the cervix is left in place, however, you must be willing to continue annual pap smears to screen for cervical cancer.

<p>Small incisions, less than 1/4" each, are made in the abdomen.</p>	
<p>Using a laparoscope and small instruments, the surgeon removes the uterus through one of the opening.</p>	
<p>This procedure enables the surgeon to leave the cervix intact.</p>	