

Laparoscopic laser myomectomy

Interventional procedures guidance

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www.nice.org.uk/guidance/ipg23

Your responsibility

This guidance represents the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take this guidance fully into account, and specifically any special arrangements relating to the introduction of new interventional procedures. The guidance does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

All problems (adverse events) related to a medicine or medical device used for treatment or in a procedure should be reported to the Medicines and Healthcare products Regulatory Agency using the [Yellow Card Scheme](#).

Commissioners and/or providers have a responsibility to implement the guidance, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this guidance should be interpreted in a way that would be inconsistent with compliance with those duties. Providers should ensure that governance structures are in place to review, authorise and monitor the introduction of new devices and procedures.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

This guidance should be read in conjunction with CG44.

1 Guidance

- 1.1 Current evidence on the safety and efficacy of laparoscopic laser myomectomy does not appear adequate to support the use of this procedure without special arrangements for consent and for audit or research. Clinicians wishing to undertake laparoscopic laser myomectomy should inform the clinical governance leads in their Trusts. They should ensure that patients offered it understand the uncertainty about the procedure's safety and efficacy and should provide them with clear written information. Use of NICE's information for the public is recommended. Clinicians should ensure that appropriate arrangements are in place for audit or research. Publication of safety and efficacy outcomes will be useful in reducing the current uncertainty. NICE is not undertaking further investigation at present.
- 1.2 Clinicians undertaking this procedure should undergo training as recommended by the Royal College of Obstetricians and Gynaecologists Working Party on Training in Endoscopic Surgery.

2 The procedure

2.1 Indications

- 2.1.1 Laparoscopic laser myomectomy is used to treat uterine fibroids, also known as uterine leiomyomas or uterine myomas. Fibroids are benign tumours of the uterine muscle. They are very common and are often asymptomatic. They may cause abnormal bleeding, pelvic pressure and pain, and reproductive problems.

- 2.1.2 Hysterectomy is the standard treatment for women with fibroids whose symptoms have not resolved with medical treatment.

2.2 Outline of the procedure

- 2.2.1 Laparoscopic laser myomectomy destroys fibroids using a laparoscope passed through a small incision in the abdomen and then through the wall of the uterus. The fibroids are destroyed with a laser. For more details, see the [overview](#).

2.3 Efficacy

- 2.3.1 The evidence reviewed was of poor quality and did not clearly report efficacy outcomes, particularly outcomes relating to symptomatic relief. For more details, see the [overview](#).
- 2.3.2 The Specialist Advisors noted that the indications for this treatment were unclear, which made it difficult to assess its efficacy. One Advisor noted that the procedure was suitable only for removing relatively small fibroids, which tend to be asymptomatic, and therefore questioned the clinical value of the procedure.

2.4 Safety

- 2.4.1 The evidence reviewed was too limited to establish the safety of this procedure. For more details, see the [overview](#).
- 2.4.2 The Specialist Advisors reported that there are risks associated with the use of both laparoscopic and laser surgery, including bowel and urinary tract damage, and rupture of the uterine scar during subsequent labour.

2.5 Other comments

- 2.5.1 Fibroids that are symptomatic are generally of a size and location that would make treatment by laparoscopic laser myomectomy difficult.

3 Further information

Sources of evidence

The evidence considered by the Interventional Procedures Advisory Committee is described in the [overview](#).

Information for patients

NICE has produced [information for the public on this procedure](#). It explains the nature of the procedure and the guidance issued by NICE, and has been written with patient consent in mind.

4 Other NICE recommendations on laparoscopic laser myomectomy

Further recommendations have been made in the [NICE guideline on heavy menstrual bleeding](#) published in January 2007. Clinical and cost-effectiveness evidence was reviewed in the development of this guideline which has led to this more specific recommendation. This interventional procedure guideline remains current, and should be read in conjunction with the guideline.

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Endorsing organisation

This guidance has been endorsed by [Healthcare Improvement Scotland](#).