

In-Bag Contained Power Morcellation Technique

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About the Author



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Laparoscopic surgery has revolutionized gynecological surgery. No uterus or fibroid is too big that cannot be removed by laparoscopy. In addition to the benefits to the patients in terms of quick recovery and less pain, the new age surgeon finds laparoscopy better than open surgery as he is able to identify vital organs and structures better and with an increased magnification. All the new age tools with

the varied energy sources have made laparoscopy the standard of care (Figs. 1, 2, 3, 4, 5).

Specimen retrieval has always been difficult after the completion of surgery. Power morcellators were a boon to the surgeon when even very large specimens could be morcellated to bits and removed through a 10–15-mm port. But morcellators were temporarily suspended after reports of dissemination and upstaging of a leiomyosarcoma. There were also reports of secondary parasitic seeding of fibroids after morcellation [1].

Following all the furore, the community saw the invention of in-bag contained power morcellation [2] which could theoretically prevent dissemination and upstaging of a leiomyosarcoma and seeding of parasitic fibroids. We insert the morcellator bag into the abdominal cavity. The specimen is placed in the bag and the two limbs are brought out—one through the camera port and the other through the morcellator port. Morcellation is continued. The telescope is withdrawn, and the telescope limb closed

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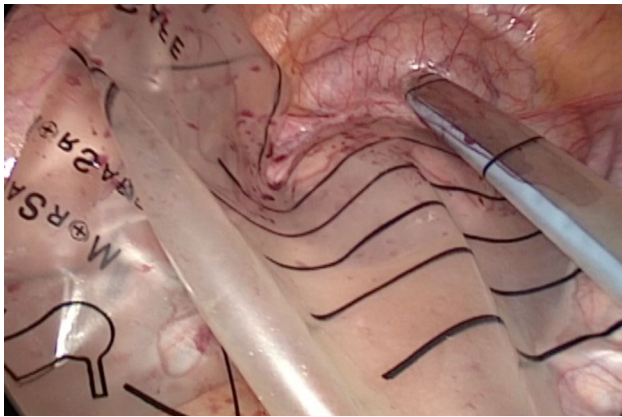


Fig. 1 Introduction of bag into the abdomen

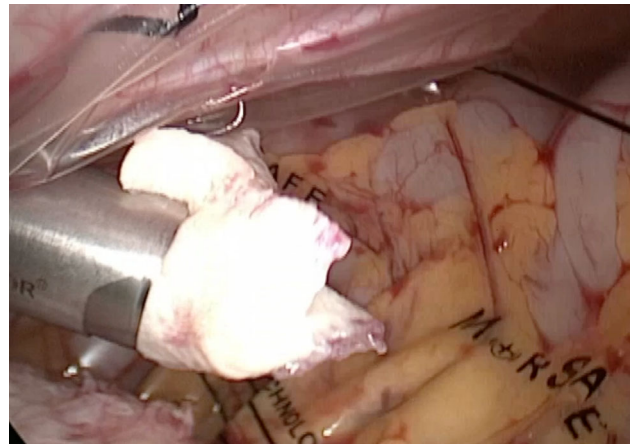


Fig. 4 Morcellation of the specimen in the bag

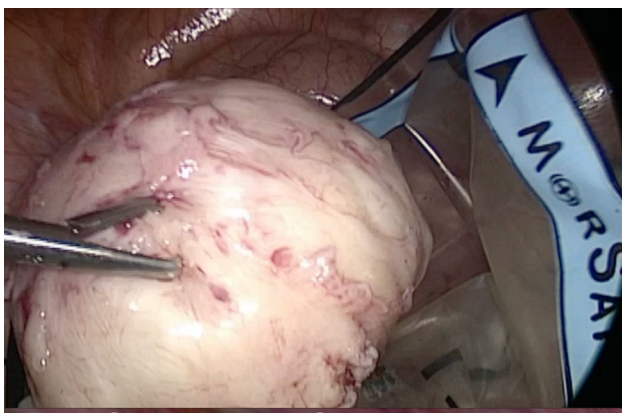


Fig. 2 Placement of the specimen into the bag

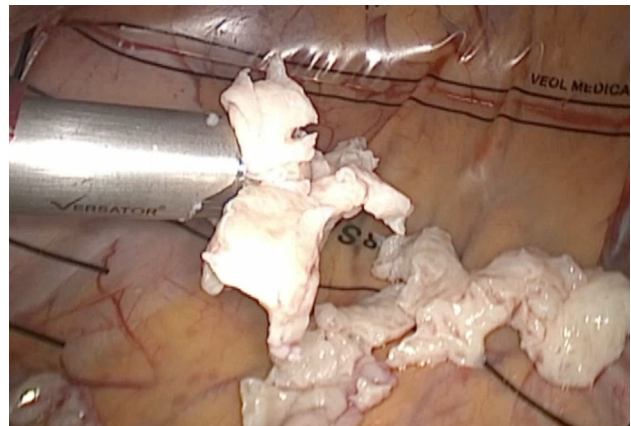


Fig. 5 Specimen bits in the bag

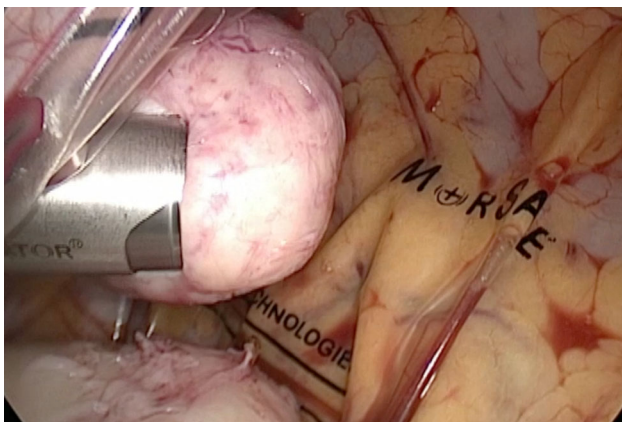


Fig. 3 Introduction of morcellator into the bag

with a suture knot. The whole bag is then retrieved through the morcellator port. We have started employing in-bag contained power morcellation for all cases of fibroids. It is a feasible technique and cost-effective, but further clinical trials are necessary [3].

Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

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