Laparoscopic Management of Ovarian Diseases

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Ovarian Cyst

- Ovarian cysts are sacs filled with fluid or a semisolid material that develops on or within the ovary.
- Surgery is indicated if the growth is larger than 4 in (10 cm), complex, growing, persistent, solid and irregularly shaped, on both ovaries, or causes pain or other symptoms.
Anatomy

1. Proper ovarian ligament
2. Ovary
3. Infundibulo-ovarian ligament
4. Suspensory ligament of ovary
5. Ovarian fimbria
6. Ampulla
Anatomy

1. Broad ligament
2. Mesosalpinx
3. Mesovarium
4. Ovarian fossa
5. Ovary
6. Fimbria
7. Ureter
Vascular Supply

1. Uterine artery
2. Medial ovarian artery
3. Lateral ovarian artery
4. Lateral tubal artery
5. Ovarian artery
Selection of Case

- Before selecting any case for laparoscopy, Ca-125, an ovarian cancer marker, may help to identify cancerous cysts in older women.

- Hormone levels (such as LH, FSH, estradiol, and testosterone) may be checked to evaluate for associated hormonal conditions.
Contraindication

Malignancy is an Absolute contraindication
Operating room Setup
Port Position
Port Position in Bilateral Cyst
Patient and Port Position
Oophorectomy
Oophorectomy
Ovarian Cystectomy

Laparoscopy is gold standard management of Ovarian Cyst
Enucleation
Ovarian Cystectomy
Ovarian Cystectomy
Oophorectomy in special circumstances
Oophorectomy in special circumstances
Oophorectomy in special circumstances
Endometrioma
Endometrioma
Ovarian Endometrioma

Laparoscopic approach
Endometriotic nodule
Endometrioma
Retrieval of Cyst
Limitations
Thank You

Every woman after puberty gets them.
Every gynaecologists feels them.
Thankfully, most of them don't really matter at all.