

東京医学会

東京医学会 第 2752 回集会

日時：平成 30 年 8 月 1 日(水) 18 : 00 ~ 19 : 00

場所：入院診療棟 B 棟 6 階会議室

演者： **Dr. Rudi Campo**

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演題： Ambulatory Hysteroscopy: A New Era has started

紹介： Although operative hysteroscopy has progressively been accepted for the treatment of intrauterine pathologies, diagnostic hysteroscopy and ambulatory surgery is still not widely and routinely used. Whereas almost all urologists utilize office cystoscopy to evaluate bladder pathology, it is estimated that less than 20% of gynecologists utilize office hysteroscopy to evaluate uterine pathology. (1)

The use of watery distention medium and the atraumatic sight control vagino-cervico insertion of the scope has been reported as one of the keystones to increase the compliance for office hysteroscopy. (2) Furthermore we have demonstrated in a PRCT that by reducing the instrument diameter both surgeons experience and cervical canal passage did not interfere in the overall success rate. (3) Recently the value of this concept was confirmed in the Trophy study published in the Lancet 2016. (4).

Hysteroscopy has come a long way but today the combination of Ultrasound, Trophy hysteroscopy, contrast sonography and mini surgical instruments provide the possibility for every trained examiner to perform a one stop uterine diagnosis, including endo or myometrial tissue sampling.

The new Era follows the major technical improvements in the manufacturing of high-quality small-bored rigid optics with the production of the mini bipolar resectoscope, the mini IBS Shaver and the Trophy hysteroscope . This has given a perfect answer to the challenges of an ambulatory hysteroscopic surgical unit performing interventions under local or conscious sedation. resulting in an optimization of total procedure time, increased safety, patient satisfaction and accessible for up to 90 % of all hysteroscopic interventions.

Today we centralize the ultrasound and hysteroscopic high technology in a digital ambulatory operating room providing increased patient satisfaction, safety, reduced procedure time and accessible for all diagnostic and up to 90 % of all hysteroscopic operative interventions. The digital Hysteroscopic clinic is born.

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