

MIND  
your  
BODY

NG WAN CHING

removed.

Within a week, she was back in the kitchen cooking for her family.

And despite the major surgery, she has no scars to show for it.

Ms Chow, 39, the mother of a four-year-old girl, is among a growing number of women opting for single port surgery to remove fibroids, cysts, wombs and fallopian tubes.

The procedure is carried out through a single cut in the navel. It leaves no visible scar and is thus less disfiguring than even conventional laparoscopic, or keyhole, surgery, which is done through three or four small cuts.

Since surgeons at KK Women's and Children's Hospital performed its first single port surgery in 2009, they have gone on to perform more than 90 such operations to date.

Ms Chow told Mind Your Body: "When my doctor broke the news to me that the hospital's cancer management team had advised I should remove my uterus and fallopian tubes, he added there was a technique that was quite new."

The doctor told her he had done it on a few other patients but recommended she looked for more information about it on the Internet.

The housewife did just that and agreed to the procedure.

It took less than two hours and was done under general anaesthesia.

Her only side effect, after waking up from the anaesthesia, was pain in her shoulder which went away after two or three days.

#### ONLY A SMALL PLASTER AFTER SURGERY

Madam Sulastris Slemat, 46, also had single port surgery to remove her womb.

"I had so many fibroids growing in my womb I lost count," she said.

"One of the bigger fibroids was pressing on my bladder causing urine to leak. Once that fibroid was removed, the pressure on the bladder was no longer there and the the leaking was resolved."

Madam Sulastris first had fibroids removed 11 years ago when they were getting in the way her having a baby.

There was no option then of single port surgery.

"The first time I had surgery, I woke up with a big bandage on my abdomen. This time, there was only a small plaster.

"The first time, I would hold my tummy when I walked, because I was scared something would fall out!" she laughed.

Like Ms Chow, the only niggle was a pain in her shoulder that went away after two days.

After a biopsy showed that there was a chance of Ms Deborah Chow's cervical cancer recurring, she agreed to have her uterus and fallopian tubes

"There was only a small bruise around the navel. I recovered much faster and the bruise was gone in a couple of weeks," said the language officer in the Subordinate Courts.

Dr Anthony Siow, a pioneer in the surgery here, said the pain is due to the remnant air and washing solution in the tummy irritating the diaphragm, a sheet of muscle that stretches across the bottom of the rib cage. It causes a referred pain in the shoulder.

Dr Siow believes that as more surgeons are trained in this procedure, it will become a standard surgical option for patients, although not everyone is suited for it.

#### SHORT RECOVERY PERIOD

Those who have had the surgery are pleased with the quick recovery, suffer less pain and have invisible scars, Dr Siow said. As the umbilicus inverts, the scar shrinks, he said.

"I had a flight attendant ask for this surgery so she could recover fast enough for her next flight and not have any evidence of surgery," he said.

An elderly woman who was terrified of going under the knife was relieved her ovarian cyst could be removed with only one small umbilical incision, he said.

She had open surgery, which used an incision similar to one for a Caesarean section and left a 10cm-long scar on her bikini line.

But she was able to have a son, now nine years old, and a daughter, aged seven. "Both my children were born by Caesarean section

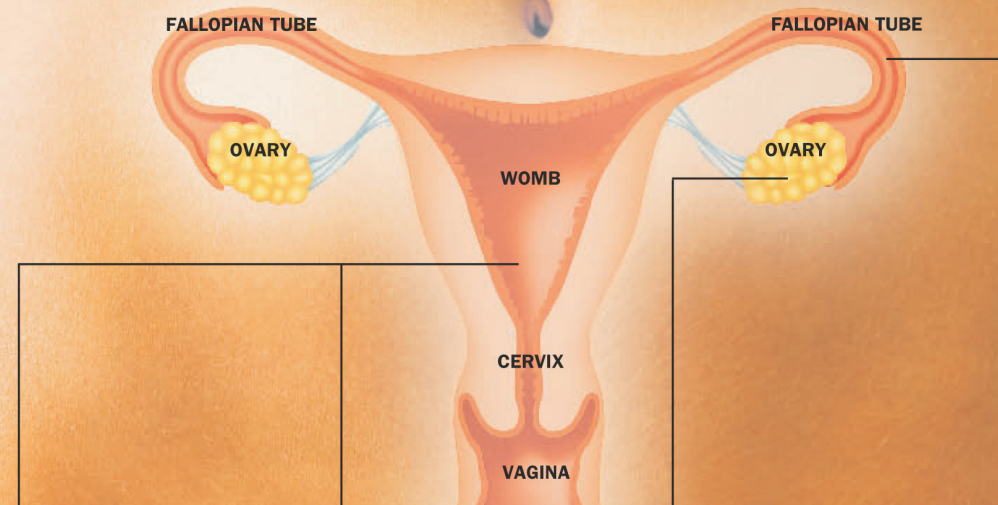


Ms Deborah Chow (left), 39, had her fallopian tubes and uterus removed through her belly button and has hardly any scar to show for it (above).

PHOTOS: ASHLEIGH SIM

# MAJOR SURGERY through the belly button

More women are opting for what is called the single port surgery, which leaves barely any scar



#### WOMB REMOVAL (HYSTERECTOMY)

A port is created at the navel to facilitate introduction of the instruments into the abdominal cavity. The tips of these instruments act together like a knife that cuts around the circumference of the cervix.

Once the incision is complete, the cervix is detached from the top of the vagina, leaving a gaping hole there. Through this hole, the womb is removed. The top of the vagina is then stitched closed.

#### FIBROID REMOVAL (MYOMECTOMY)

Fibroids, which are rather like big fishballs, can be removed through the 2cm navel incision.

Dr Anthony Siow uses a special technique to slice the fibroid into a long strip of tissue, like peeling the skin of an apple. From a "fishball" of 6 to 8cm in diameter, he cuts it down to a single strip of tissue measuring 2cm wide but 20 to 30cm long.

This long strip of fibroid tissue is then easily pulled out through the 2cm navel incision.

#### OVARIAN CYST REMOVAL (CYSTECTOMY) AND OVARY REMOVAL (OOPHORECTOMY)

To remove ovarian cysts, a special bag is inserted through the navel incision into the abdomen and the excised cyst placed inside.

The bag is then brought to the navel incision and the bag and contents are removed without spillage into the abdomen.

The ovary can be removed entirely and directly through the navel incision.

#### FALLOPIAN TUBE REMOVAL (SALPINGECTOMY), IN CASES OF PREGNANCY IN THE TUBE OR STERILISATION

The fallopian tube is cut and then removed easily through the navel incision as the tube is small and soft.

#### EARLY CERVICAL CANCER

Treatment for this involves the removal of the womb.

## Operation not suitable for some people

Not all women are suitable for single port surgery.

Some reasons include:

1. When the womb and fibroids are too large, reaching the umbilicus.
2. When there is severe disease or infection causing the pelvic organs to be stuck to one another.
3. When the patient has had many previous operations, leaving internal scarring (adhesions).
4. When the patient is not fit for a slightly longer surgery (single port surgery takes about 45 minutes more than conventional laparoscopic surgery).

The risks of single port surgery are comparable to conventional laparoscopy or open surgery.

"I spent a lot of time thinking through the procedure, re-evaluating after each case, reviewing the videos to ensure that all risks are minimised," said Dr Anthony Siow, Director of the Minimally Invasive Surgery Centre at KK Women's and Children's Hospital.

Doctors also started with the simple cases and took on bigger-sized uteri or fibroids when they gained more experience.

"So far, we have not had a major complication," he said.

The only concern is umbilical hernia, which may occur when the single port site does not heal well and the contents of the body cavity bulge out of the area where they are normally contained.

However, there is less risk of injury during surgery as each additional port placed on the abdomen has the inherent risk of hitting blood vessels and bowels.

There is also less risk of hernia at each and every one of the sites where the ports are placed.

On top of less scarring and pain, single port surgery also offers the patient an easier post operative time in terms of taking care of the wound.

"It's easier to change only one bandage, rather than three or four," said Dr Siow.