

Considering Surgery for Pelvic Prolapse?

Learn about minimally invasive
da Vinci Surgery



da Vinci  ***Surgery***

The Condition:

Pelvic Prolapse

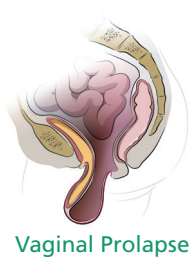
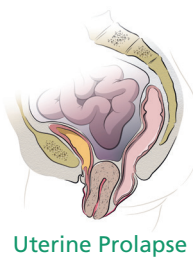
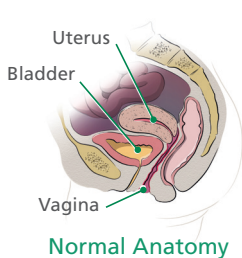
Pelvic prolapse is a condition that occurs when muscles and ligaments supporting your pelvic organs weaken. As a result, these organs (uterus, vagina, cervix, bladder, urethra, or rectum) slip from their normal position.

Severe uterine prolapse can cause the uterus to slip partially into the vagina. It may cause the upper part of the vagina to sag into the vaginal canal or even outside the vagina.

Some women with prolapse have no symptoms. Others may experience: a feeling of sitting on a ball, pulling in the pelvis, pelvic or abdominal pain, painful intercourse, protrusion of tissue from the vagina, bladder infections, vaginal bleeding, unusual discharge, constipation or frequent urination.¹

Pelvic prolapse is common, affecting about one in every three women who have had a child.²

One in nine women experience symptoms severe enough to need surgery.² Risk factors for prolapse include multiple vaginal deliveries, age, obesity, hysterectomy and smoking.¹



Surgical Options:

Sacrocolpopexy

Your doctor may recommend medication or lifestyle changes to ease your symptoms. If non-surgical treatments do not help or if your symptoms get worse, your doctor may recommend surgery. The procedure is called sacrocolpopexy. During the operation, surgical mesh is used to hold your affected pelvic organ(s) in their natural position. The mesh remains in place permanently. This procedure is not the same as what occurs during transvaginal placement of mesh. Your doctor can fully explain the differences and process to you.

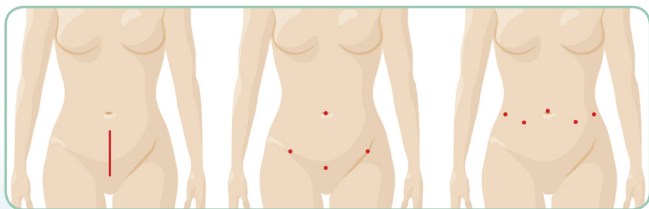
Sacrocolpopexy is considered the most effective way to correct pelvic prolapse and resolve symptoms.³ It may also be performed following a hysterectomy to provide long-term support for the vagina.⁴

Sacrocolpopexy has traditionally been performed using open surgery. A long, horizontal incision is made in the lower abdomen which allows doctors to reach your pelvic organs.



Laparoscopic surgery is a minimally invasive alternative to open surgery. With laparoscopy, your surgeon operates through a few small incisions using a tiny camera and long, thin surgical instruments. The camera sends images to a video monitor in the operating room to guide surgeons as they operate.

Another minimally invasive surgical option for women diagnosed with pelvic prolapse is *da Vinci* Surgery.



Open Surgery
Incision

Laparoscopy
Incisions

da Vinci Surgery
Incisions

da Vinci Surgery:

A Minimally Invasive Surgical Option

With the *da Vinci* System, your surgeon operates through a few small incisions - similar to traditional laparoscopy. The *da Vinci* System features a magnified 3D HD vision system and tiny wristed instruments that bend and rotate far greater than the human wrist. These features enable surgeons to operate with enhanced vision, precision, dexterity and control - even for complex cases.⁴

As a result of *da Vinci* technology, *da Vinci* Sacrocolpopexy offers the following potential benefits compared to open surgery:

- › Less blood loss^{5,6}
- › Shorter hospital stay⁵
- › Small incisions for minimal scarring

As a result of *da Vinci* technology, *da Vinci* Sacrocolpopexy offers the following potential benefits compared to traditional laparoscopy:

- › Shorter operation⁷
- › Less blood loss⁷
- › Shorter duration with catheter⁷

Additional potential benefits of *da Vinci* Sacrocolpopexy:

- › Low rate of complications^{4,8}
- › High sexual function⁸
- › Improved urinary, bowel and pelvic symptoms⁸

Risks & Considerations Related to Sacrocolpopexy & *da Vinci* Surgery:

Mesh erosion/infection caused by mesh moving from vaginal wall into surrounding organs causing the need for another operation, injury to rectum/bowel, injury to bladder (organ that holds urine), injury to the ureters (the ureters drain urine from the kidney into the bladder), front wall of the rectum pushes into the back wall of the vagina, prolapsed bladder (bladder budges into vagina when supportive tissue weakens), vaginal incision opens or

separates, loss of bladder control, pooling of blood between bladder and pubic bone, pooling of blood between the anus and vagina. Pelvic prolapse patients undergoing a hysterectomy who have an undiagnosed cancer may be at risk of having cancer cells spread if the uterus is cut into pieces for removal.

Important Information for Patients:

Serious complications may occur in any surgery, including *da Vinci*® Surgery, up to and including death. Examples of serious or life-threatening complications, which may require prolonged and/or unexpected hospitalization and/or reoperation, include but are not limited to, one or more of the following: injury to tissues/organs, bleeding, infection and internal scarring that can cause long-lasting dysfunction/pain. Risks of surgery also include the potential for equipment failure and/or human error. Individual surgical results may vary. Risks specific to minimally invasive surgery, including *da Vinci* Surgery, include but are not limited to, one or more of the following: temporary pain/nerve injury associated with positioning; temporary pain/discomfort from the use of air or gas in the procedure; a longer operation and time under anesthesia and conversion to another surgical technique. If your doctor needs to convert the surgery to another surgical technique, this could result in a longer operative time, additional time under anesthesia, additional or larger incisions and/or increased complications. Patients who are not candidates for non-robotic minimally invasive surgery are also not candidates for *da Vinci*® Surgery. Patients should talk to their doctor to decide if *da Vinci* Surgery is right for them. Patients and doctors should review all available information on non-surgical and surgical options in order to make an informed decision. For Important Safety Information, including surgical risks, indications, and considerations and contraindications for use, please also refer to www.davincisurgery.com/safety and www.intuitivesurgical.com.

Your doctor is one of a growing number of surgeons worldwide offering *da Vinci*® Surgery.

For more information and to find a *da Vinci* surgeon near you, visit:
www.daVinciSurgery.com

¹ Available from: <http://www.nlm.nih.gov/medlineplus/ency/article/001508.htm> ²

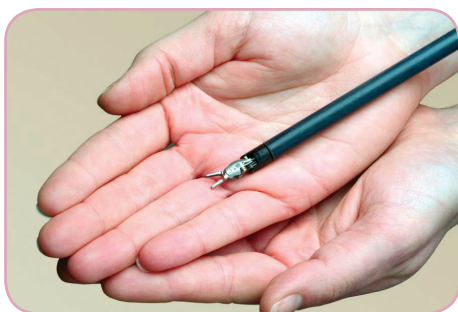
Available from: http://www.iuga.org/resource/resmgr/brochures/english_pop.pdf

³ Nygaard IE, McCreery R, Brubaker L, Connolly A, Cundiff G, Weber AM, Zyczynski H; Pelvic Floor Disorders Network. Abdominal sacrocolpopexy: a comprehensive review. *Obstet Gynecol.* 2004 Oct;104(4):805-23. ⁴ Elliott DS, Krambeck AE, Chow GK. Long-term results of robotic assisted laparoscopic sacrocolpopexy for the treatment of high grade vaginal vault prolapse. *J Urol.* 2006 Aug;176(2):655-9. ⁵ Geller EJ, Siddiqui NY, Wu JM, Visco AG. Short-Term Outcomes of Robotic Sacrocolpopexy Compared With Abdominal Sacrocolpopexy. *Obstetrics & Gynecology.* 2008;112:1201-6. ⁶ Siddiqui NY, Geller EJ, Visco AG. Symptomatic and anatomic 1-year outcomes after robotic and abdominal sacrocolpopexy. *Am J Obstet Gynecol.* 2012 May;206(5):435.e1-5. Epub 2012 Feb 1. ⁷ Geller EJ, Parnell BA, Dunivan GC. Pelvic floor function before and after robotic sacrocolpopexy: one-year outcomes. *J Minim Invasive Gynecol.* 2011 May-Jun;18(3):322-7. Epub 2011 Apr 1.

The Enabling Technology:

da Vinci Surgical System

The *da Vinci* Surgical System is designed to provide surgeons with enhanced capabilities, including high-definition 3D vision and a magnified view. Your doctor controls the *da Vinci* System, which translates his or her hand movements into smaller, more precise movements of tiny instruments inside your body.



Though it is often called a “robot,” *da Vinci* cannot act on its own. Surgery is performed entirely by your doctor. Together, *da Vinci* technology allows your doctor to perform routine and complex procedures through just a few small openings, similar to traditional laparoscopy.

The *da Vinci* System has been used successfully worldwide in approximately 2 million various surgical procedures to date. *da Vinci* - changing the experience of surgery for people around the world.