Fertility Outcomes following ablation using plasma energy versus cystectomy in infertile women with ovarian endometriomas: a prospective multicentric comparative study

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Introduction and Objectives:
What is already known is that endometrioma ablation using plasma energy allows good post-operative pregnancy rates, however studies comparing this technique with endometrioma cystectomy have not been reported.
The objective is to compare the probability of postoperative pregnancy in infertile women with ovarian endometriomas larger than 3cm in diameter, managed by either ablation using plasma energy or cystectomy.

Methods: Prospective multicentric study enrolling 104 infertile patients managed for ovarian endometriomas larger than 3cm. 64 patients underwent ablation using plasma energy and 40 underwent cystectomy.

Results: Mean follow up was 35.3 +/- 17.5 months. Patients managed by plasma energy were significantly older than those managed by cystectomy, had significantly higher overall rAFS score and higher rate of douglas pouch obliteration, deep endometriosis and colorectal localizations. Postoperative outcomes were comparables. 76 pregnancies (73.1%) were recorded; 24 pregnancies were spontaneous (31.6%) more frequent in the plasma group: 40.1% vs 18.8%. The probability of pregnancy at 24 and 36 months after surgery in plasma and cystectomy groups was respectively 61.3% vs 69.3% and 84.4% vs 78.3%.

Discussion/Conclusion: The probability of pregnancy appears comparable after endometriomas management by cystectomy and plasma energy ablation. Thus, the ablation using plasma is a valuable tool, which allows high pregnancy rate in a series of infertile patients with overall more severe endometriosis.

Mots clefs : Endometriomas, plasma energy, cystectomy, infertility
Auteurs :
Références : , , ,

Auteurs

Basma Darwish 1, Horace Roman 1, Oana Mircea 1,
1. Gynecology, Rouen University Hospital, Rouen, FRANCE

Auteurs (raw format)

Darwish Basma - email : basma.darwish@gmail.com Etablissement : Rouen University Hospital Service : Gynecology Ville : Rouen Pays : FRANCE Présentateur : Oui
Roman Horace - email : Etablissement : Rouen University Hospital Service : Gynecology Ville : Rouen Pays : FRANCE Présentateur : Non
Mircea Oana - email : Etablissement : Rouen University Hospital Service : Gynecology Ville : Rouen Pays : FRANCE Présentateur : Non