

This thesis submits retrospective analytic study Evaluating and peroperation early postoperation Complications of laparoscopically assisted vaginal hysterectomy (LAVH).

The aim of this thesis was to find out:

? what peroperation and early postoperation Complications of LAVH Occur on patient file

? to analyze individual Types of Complications on patient file

? Compare to the results of retrospective study with national Indications (with the help of national register of Complications of Gynaecological laparoscopy)

? Possible discuss prevention of the most severe Complications of LAVH

The text part is Devoted to Indications and contraindications of laparoscopic operation, and Complications That May Occur During Describes the operation and execution of laparoscopically assisted vaginal hysterectomy.

The Necessary information for the thesis is based on operation records of Patients operated in the years 2000 - 2004 in ÚPMD. Data Shown are processed with the aim to answer to the questions mentioned above.

Further in the thesis there Presented are the results of the study and Their

Evaluation. I ANALYZED peroperation and early postoperation Complications of LAVH in the file of 394 Patients operated in the year 2000 to 2004 in ÚPMD. The peroperation or early postoperation Complications occurred in cases of 154 (39%) of Patients, from That in of 118 cases (29.9%) Patients Were These minor Complications (fever, infiltration, positive cultivation) in the case of 36 (9.1%) Patients Were These severe Complications - bleeding in 27 (75%) cases, reoperation in 5 (14%) cases, injury of urinary bladder in 4 (11%) cases. The conversion from laparoscopic procedure on laparotomy was effected in 4 (1.02%) cases (in 3 cases on the ground of bleeding, in 1 patient on the ground of multiplex adhesive process in pelvic cavity).

The low incidence of Complications of LAVH is above all given the dexterity of

the surgeon, surgical team (operator, dressers, suture nurse, anesthetist, anesthetic nurse), the quality of technical equipment and facilities applicable to solve Possible Complications.