

Questions to ask your surgeon or physician about having fibroid removal surgery

Before undergoing surgery to remove your fibroids, you will likely have many questions for your surgeon or physician. Below are some recommended questions to ask – and background information to help you weigh the answers:

How will you perform the surgery?

There are two main surgical treatment options for removing fibroids: a myomectomy, which only removes the fibroids, and a hysterectomy, which removes the uterus and fibroids. The type of surgery you choose should be based on your individual health concerns and desire to have children in the future.

Within these two surgical options, OB-GYNs also perform a wide range of surgical techniques with significantly different incision lengths, recovery times, and risk of complications. For example, unlike standard laparoscopic and robotic techniques, a new myomectomy procedure called LAAM-BUAO, pioneered by board certified GYN surgeons at [The Center for Innovative GYN Care](#), takes the best elements of both laparoscopic and open approaches for myomectomy. LAAM entails two small incisions, one at the belly button and one at the bikini line, and it can be performed on any patient regardless of fibroid size, number, or location. LAAM stands for Laparoscopic Assisted Abdominal Myomectomy. BUAO stands for Bilateral Uterine Artery Occlusion, which is the permanent or temporary blockage of the uterine artery during the procedure to control bleeding. Due to the advantage of the surgeon being able to feel all of the fibroids, LAAM is the most thorough minimally invasive technique used for a myomectomy. Most LAAM procedures are done in an outpatient setting, and patients are able to return to their lives sooner than with open procedures.

Be sure your physician is using the latest advances in minimally invasive GYN surgery, as explained in our [myomectomy](#) and [hysterectomy](#) pages.

Do you recommend open surgery?

Open myomectomies are still the mostly commonly performed surgery to remove fibroids, but the major disadvantage with this type of approach is that it requires a much larger incision than new, minimally invasive techniques, resulting in longer hospital stays, more pain during recovery and longer recovery times – patients often need six to eight weeks to recover. A LAAM procedure; however, can be conducted in an outpatient setting with no hospital stay, and women generally recover in 10-14 days.

How many times have you performed this surgery?

When it comes to any form of surgery, training, skill and practice matter, which is why GYN surgeons who specialize in minimally invasive surgery are the most qualified. The reality is that OB-GYNs are highly skilled obstetric practitioners, but very few perform GYN surgeries often enough to be surgical specialists. This is borne out by studies, which find that GYN surgery is commonly a secondary component of what an OB-GYN does.

What have other patients experienced after this procedure?

Ask specific questions about recovery times and hospital stays. New, innovative procedures can be performed in an outpatient setting and generally require only 10-14 days to recover, not six to eight weeks.

Have you received fellowship training in minimally invasive GYN surgery?

While most OB-GYNs are highly trusted generalists, they spend most of their time focusing on obstetrics and basic GYN care and therefore, perform specialized GYN surgeries rarely. Be sure to choose a surgeon who has received comprehensive training and performs many minimally invasive surgeries to remove fibroids each year.

Will power morcellation be used to remove tissue during the surgery?

This is an important question when considering fibroid removal surgery. The reason is because hidden uterine cancer called sarcoma can be spread through the abdomen and pelvis during surgery when the small motorized blades in these devices spin at high speed to cut the fibroids into small strips for removal. The Food and Drug Administration (FDA) now requires all surgeons to tell women in advance if the surgery involves a power morcellator and to get written consent before the surgery takes place. Today, new minimally invasive surgical options are available that do not involve power morcellation, such as LAAM-BUAO.

Will robotics be used to assist with the surgery?

Although the American Medical Association and other leading medical societies have issued statements discouraging robotic techniques due to much higher costs to patients without any medical advantages, robotics continue to be used in GYN surgeries. This is because robotic procedures “enable” an OB-GYN not well trained in laparoscopic GYN surgical techniques to complete a procedure through a “minimally invasive” approach. This is why women should ask if robotics will be used and seek a specially trained surgeon able to perform the latest minimally invasive surgical techniques without using robotics.

What is my anticipated recovery time?

Patients who undergo myomectomies using robotic and open techniques can expect recovery times of 2-4 weeks and 6-8 weeks respectively. By selecting newer, innovative techniques, patients can return to their normal daily routines in as little as 10-14 days.

What are my other surgical options?

If your physician recommends an open or robotic procedure, ask why he or she would not recommend a conventional laparoscopic myomectomy or a newer technique like the LAAM-BUAO. [This infographic](#) explains all of the pros and cons of each procedure and helps patients advocate for the best care for themselves and their loved ones.

Women need to be their own best advocate, which is why getting a second opinion is always good practice. Since there are different surgical options for treating fibroids, getting a second opinion is a way you can ask questions about how the surgery will be performed, the recovery time, and possible complications.