



Laparoscopic Treatment of Abdominal Wall Endometriosis: A Retrospective Analysis of 8 Cases

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Objective: To summarize the clinical data of abdominal wall endometriosis (AWE) patients who received laparoscopic treatment, and evaluate the feasibility and advantages of laparoscopic treatment of AWE.

Design: Retrospective study conducted in a tertiary care center.

Methods: Retrospective analysis of 8 AWE patients who received laparoscopic treatment in our hospital from August 2020 to June 2022, Data of basal clinical characteristics, operation details and postoperative details were collected and analyzed..

Results: All 8 patients received laparoscopic treatment successfully. The average operation time was (212.13 ± 48.16) minutes, the average estimated blood loss was (25.00 ± 11.18) ml and the average postoperative hospital stay was (5.25 ± 1.39) days. Seven patients were found to have concurrent pelvic lesions during operation, including 7 cases of pelvic endometriosis, 2 cases of uterus leiomyoma, and 1 case of bilateral inguinal hernia. Seven patients underwent laparoscopic surgery for the treatment of pelvic lesions simultaneously during the operation, including resection of pelvic endometriosis in 7 patients, myomectomy in 2 patients, and high ligation of inguinal hernia sac in 1 patient. Endometriosis glands were found in postoperative pathological examination of all resected lesions. No intraoperative and postoperative complications were found. No recurrence of AWE was found during follow up period.

Conclusion: Laparoscopic surgery is a safe, effective and feasible treatment option for AWE patients, which owns the advantages of diagnosis and treatment of other pelvic lesions at the same time.

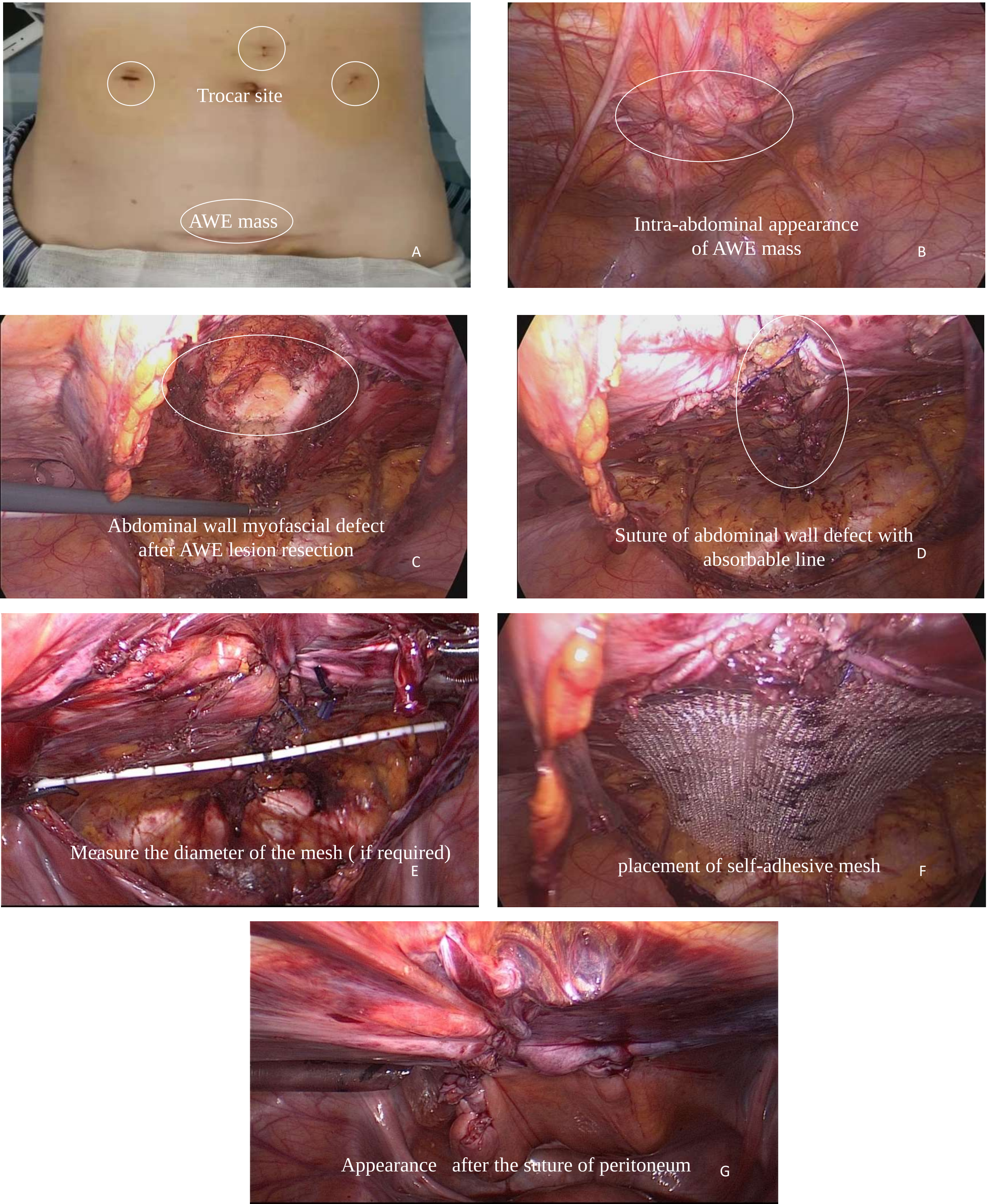


Figure. Key surgical procedures of laparoscopic treatment of AWE