

LAPAROSCOPY IN PREGNANCY: Evaluating Safety and Risk Through a Middle-Eastern Lens

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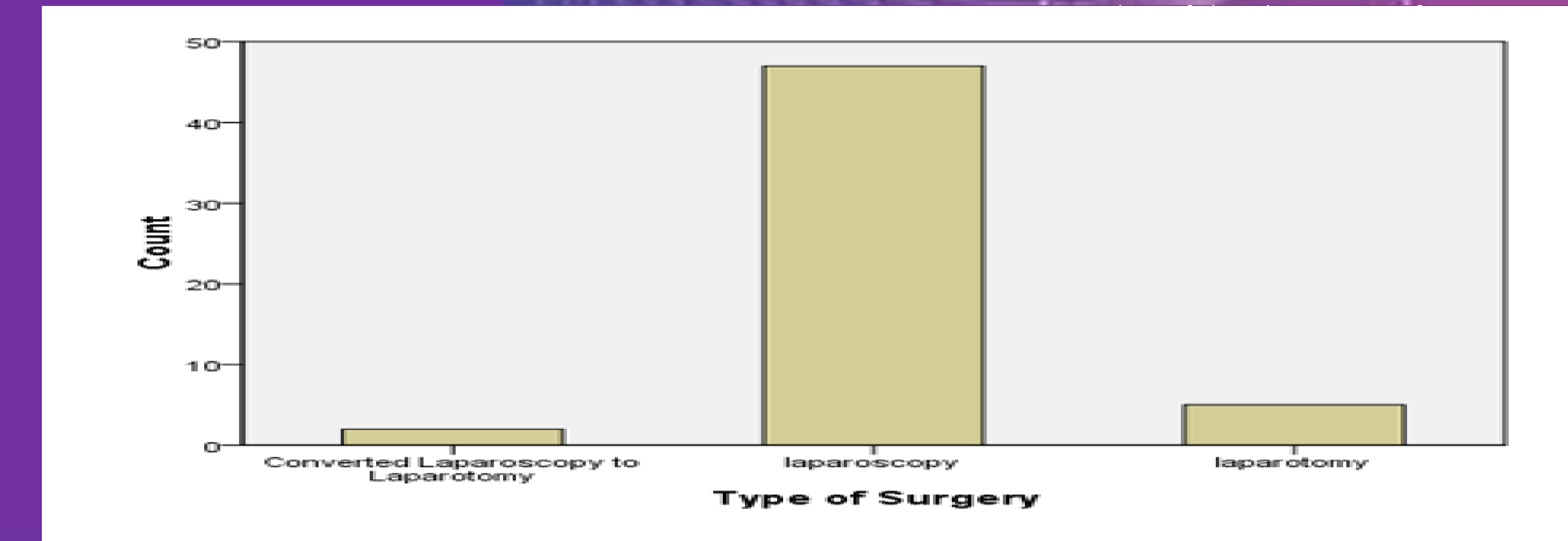
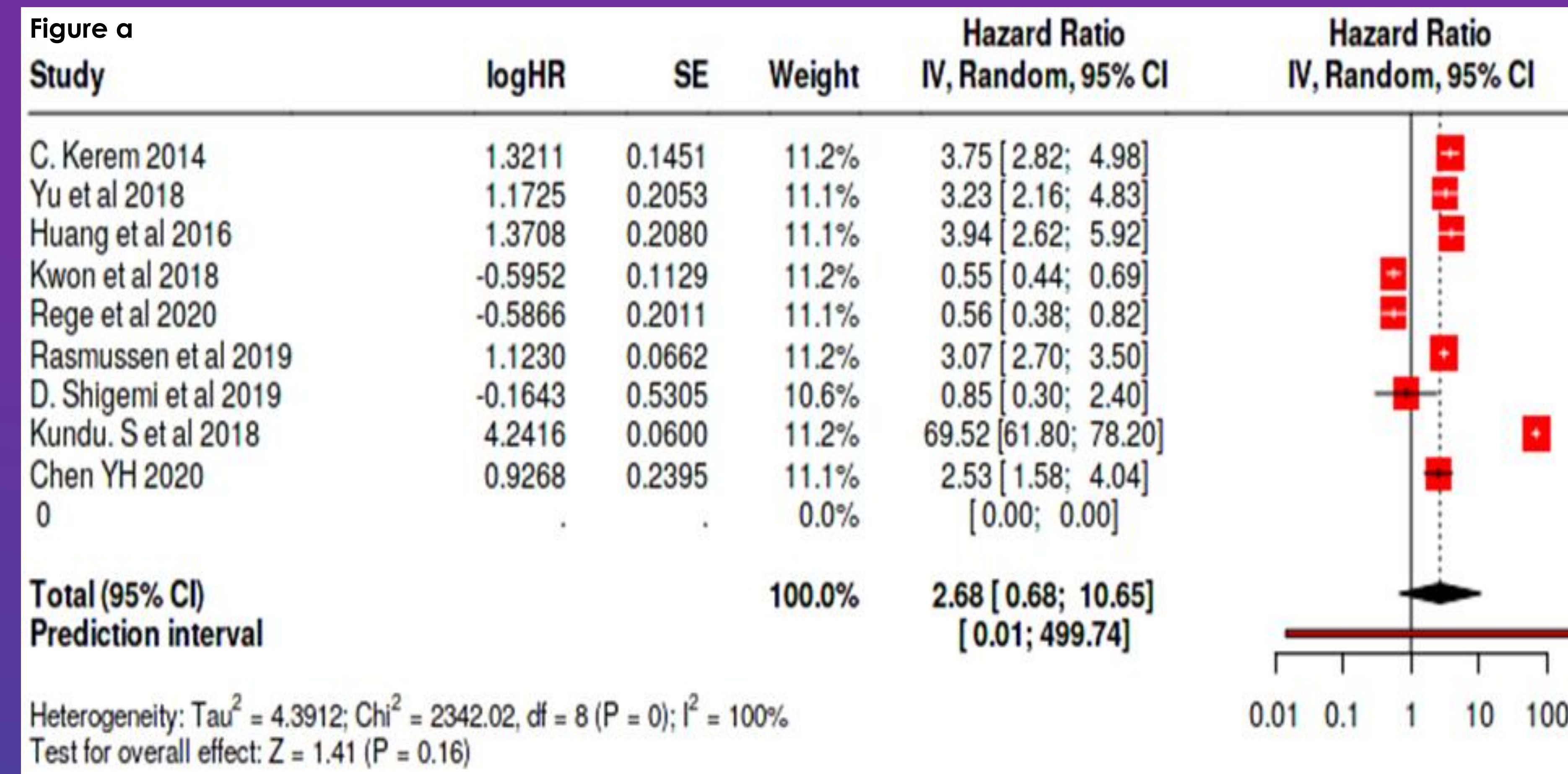
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Objective

Non-obstetric surgeries during pregnancy address medical or surgical conditions unrelated to pregnancy. Such procedures carry increased risks of adverse obstetric outcomes, including miscarriage, preterm delivery, and low birth weight. This study evaluates the surgical, obstetric, and fetal outcomes, as well as the safety and feasibility of open and laparoscopic surgeries for non-obstetric indications during pregnancy. It also examines the association between these surgeries and pregnancy outcomes through a retrospective cohort multicenter analysis.

Design and Method

This quantitative research employs a retrospective cohort multicenter analysis. The study analyzes data from 80 pregnant patients who underwent non-obstetric abdominal surgeries, ensuring statistical power through sufficient record availability across three centers: Al-Ain Hospital, Tawam Hospital, and Corniche Hospital. Data was collected from the Mallafi electronic medical record system and institutional perinatal databases for surgeries performed between January 2008 and December 2023. Descriptive statistics using SPSS summarize the data.



Conclusion

Recent literature from 2014 to 2024 suggests that non-obstetric surgeries, when appropriately managed, are generally safe during pregnancy. The preference for performing surgeries in the second trimester and avoiding elective cesarean sections unless medically necessary aligns with current best practices.

The advantages suggested by our study indicate that laparoscopic surgery may be a preferable option when feasible, as it appears to reduce maternal morbidity without significantly increasing the risk of adverse fetal outcomes. It supports the use of laparoscopic techniques, contingent upon the expertise of the professionals and tailored to individual patient cases.

References

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