Vaginal Cuff Dehiscence in a Series of 12,398 Hysterectomies: Effect of Different Types of Colpotomy and Vaginal Closure

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1. What was the study design? Discuss the advantages and disadvantages of the design employed by the authors to achieve their objectives. Is there a better way to study the factors associated with a rare event such as vaginal dehiscence following hysterectomy?

2. The authors studied women who underwent hysterectomy over a 14-year period of time. Discuss the difficulty of establishing uniformity of patient characteristics, exposures, and identification of outcomes over such a long time span. How did the authors demonstrate that the variables they studied did not interact with date of hysterectomy?

3. Review the demographics of the patient population and descriptions of hysterectomy techniques (the latter provided by the authors and found in references 9-12) and the incidence of vaginal dehiscence. Discuss any differences from your patient population and the techniques you employ currently. Are any of those differences important to risks for vaginal dehiscence? Can you generalize the authors’ conclusions to your patients?

4. How were eligible patients identified? On what basis were patients excluded from analysis? How was vaginal dehiscence detected? Was the level of surveillance the same for all patients? How many patients did not receive follow-up at 24 months?

5. The methods of hysterectomy and of cuff closure were not the same for all patients. How were the methods chosen for each patient? What factors may have influenced the choices? Discuss whether the generalizability of “real life” choice of methods justifies the confounding of the analysis with nonrandom selection of techniques.

6. The authors report that institutional policy determined the monopolar cutting power for laparoscopic colpotomy. Does your institution have a similar policy? If so, what is your estimate of the degree of adherence to the policy?

7. Discuss possible reasons why the authors did not employ multivariable analysis in this study.

8. Discuss the statistical power of this study to detect differences in incidence of vaginal dehiscence among methods of hysterectomy, methods of peritoneal closure, and presence or absence of malignancy.

9. The authors acknowledge that some of the information has been reported previously. If you were doing a systematic review and meta-analysis, how would you account for this in your pooled estimates?

10. In the accompanying editorial, Dr. Falcone states, “Gynecologists should consider closing the vaginal cuff vaginally at laparoscopic hysterectomy until they achieve the skill for adequate laparoscopic suturing.” Do you agree with his recommendation? Discuss the methods by which one determines whether a surgeon has achieved adequate skills for laparoscopic suturing.