

Important Considerations When Choosing A Gynecologic Surgeon

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If and when a decision is made to move forward with gynecological surgery, having the most qualified surgeon is critical to the patient's surgical experience – including possible risks and complications, degree of post-operative pain and discomfort, length of recovery, downtime from work and family, overall outcome of the procedure, and the patient's level of satisfaction with it .

It's important to remember that Ob/Gyns are trained primarily in the management of obstetrics and routine gynecological care. Their residency programs focus on primary/well-woman care, obstetrics, infertility, office gynecology and office gynecologic procedures. The main focus of their medical practice is the management of pregnancy, labor and delivery, versus surgery. In fact, only 20% of the average U.S. Ob/Gyn practice is dedicated to gynecologic care, and only 5% is devoted to gynecologic surgery.

It's perfectly natural to trust your Ob/Gyn for obstetric care and routine gynecology, such as pap smears, management of fibroids and treatment of infections. Gynecologic surgery, however, is entirely different.

Laparoscopic and other advanced, minimally invasive surgical techniques have revolutionized the way gynecological surgery can and should be approached, providing women numerous advantages over traditional surgery, including no unsightly incisions and far faster, less painful recovery. The typical Ob/Gyn, however, has not been trained in or exposed to these new surgical techniques. Gaining proficiency and confidence in these techniques requires constant practice, as well as constant, high surgical volumes to ensure continued skill and comfort with these procedures – both of which the average Ob/Gyn practice does not have. In fact, the average Ob/Gyn practice only performs 24 major surgeries per year. Practices specializing in laparoscopic surgery can average that number in a single month, and as many as 300 a year – practically one per day!

What is even more troubling is that most Ob/Gyns are not capable of performing hysterectomy – one of the most common gynecological surgeries – laparoscopically (known as TLH or LSH). In fact, roughly 60%-65% of all hysterectomies in the U.S. are still performed in operations requiring a large C-section size abdominal incision (TAH). This operation requires two to three days of costly hospitalization, and a difficult, painful recovery of six to eight weeks during which activities are severely restricted. It also leaves an unsightly scar and scar tissue in the lower abdomen, and can result in infections, hernias or other wound-healing problems. This lengthy, uncomfortable downtime from work, family and friends is not only impractical for women, it's also completely unnecessary.

Laparoscopic hysterectomies require no unsightly incisions and provide patients much faster, far less painful recoveries. Patients are usually able to drive within a few days and resume most activities

within 7-10 days. Some surgical facilities, in fact, even perform the procedure as an outpatient surgery, with the patient safely returning home the very same day of surgery!

When patients are told they are not candidates for laparoscopic surgery, it may mean their physicians are not trained or comfortable in performing the procedure. Before agreeing to have a laparoscopic or other minimally invasive procedure, patients should always ask their doctors these important questions:

- How many of these procedures do you do regularly?
- How often do your patients experience complications from the surgery?
- How often does a planned laparoscopic procedure result in an “open” surgery?
- How many days of hospitalization, if any, are required for the procedure?
- What is the typical patient recovery for the procedure in terms of pain, length of recovery, and downtime from work and “normal” activities?
- Do you have patients who’d be willing to discuss their experience with the procedure (with, of course, their privacy maintained)?

Remember, if you have a gynecological condition that needs specialty treatment, you need to see an expert in that surgical specialty. Most Ob/Gyns do not specialize in laparoscopic surgery. The skills and surgical techniques of those that do can vary greatly. Your choice of a surgeon can make a huge difference in your overall surgical outcome and experience.

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