

V-NOSE en bloc laparoscopic hysterectomy with segmental bowel resection for deep infiltrating endometriosis (#ENZIAN C3)

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ABSTRACT

Background: Deep endometriosis (DE) with intestinal involvement occurs in up to 16% of patients with endometriosis, representing one of the most challenging manifestations of the disease.

Objectives: To describe a laparoscopic technique for the management of DE with bowel involvement through an en bloc resection that includes hysterectomy, appendectomy, and segmental bowel resection, using natural orifice specimen extraction (V-NOSE).

Participant: A 35-year-old woman presented with severe dysmenorrhea, deep dyspareunia, and intestinal symptoms. A pelvic magnetic resonance imaging revealed a 3.9 cm #ENZIAN C3 intestinal nodule.

Intervention: A laparoscopic approach was employed to perform an en bloc resection of the C3 rectal nodule, including segmental bowel resection and end-to-end anastomosis, with the V-NOSE technique. The patient provided informed consent for the publication of this video article and its online posting. The total time for the operation was 100 minutes, and the estimated blood loss was 30 mL. The complete excision was accomplished without intraoperative complications. The postoperative course was uneventful: the patient tolerated oral intake at 48 hours and was discharged 76 hours after surgery.

Conclusions: En bloc laparoscopic hysterectomy enables complete excision of DE with bowel involvement and could reduce operative time and complications, potentially contributing to favourable long-term outcomes.

What is New? The integration of a laparoscopic approach, anterior colpotomy with the uterus attached to the rectovaginal nodule, and V-NOSE specimen extraction could represent a safe and efficient strategy for complex cases of deep infiltrating endometriosis with intestinal involvement in carefully selected patients.

Keywords: Anastomosis, endometriosis, hysterectomy, intestines, laparoscopic, Natural Orifice Endoscopic Surgery

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Informed consent: The patient featured in this video provided written informed consent for publication and online dissemination of the video material, including on digital platforms, social media, and scientific repositories.

Data sharing: The data supporting the findings of this study are not publicly available due to concerns regarding patient confidentiality and institutional restrictions. However, de-identified data may be made available from the corresponding author upon reasonable request, in accordance with ethical and legal standards.

Transparency: The lead author affirms that this manuscript is an honest, accurate, and transparent account of the study being reported. No important aspects of the study have been omitted, and any deviations from the original protocol have been clearly explained within the manuscript.



Video 1. V-NOSE en bloc laparoscopic hysterectomy with segmental bowel resection for deep infiltrating endometriosis (#ENZIAN C3): <https://youtu.be/wi0RtayM5fk>
