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Comparative evaluation of conventional and Transvaginal laparoscopic ovariohysterectomy in dogs
Jalal Bakhtiari, Azin Tavakoli, Alireza Khalaj, Elham Aminloo

1 Department of Clinical Sciences 2 Faculty of Veterinary Medicine 3 University of Tehran

Objectives of the study:
The objective of this study was to evaluate the feasibility and safety of the new introduced laparoscopic transvaginal ovariohysterectomy and to compare the technique with the conventional laparoscopic ovariohysterectomy in dogs.

Material and Methods:
Methods- Twenty four adult healthy female mixed breed dogs weighting 14 - 17 kg who were candidates for the elective neutering were divided into two equal groups randomly. Under aseptic conditions and general anesthesia, dogs were prepared for either conventional three portal laparoscopic abdominal ovariohysterectomy (group A) or laparoscopic transvaginal ovariohysterectomy (group B). In group A three midline abdominal portals was used to perform ovariohysterectomy and in group B the procedure was done through two midline abdominal and one vaginal portals. Transection of ovarian pedicles, broad ligament and uterus was done and the resected tissues were removed either from umbilicus or vaginal portal in group A or B respectively. Mean surgical time, intraoperative, postoperative and wound complications were recorded in both groups.

Results:
Results- All surgeries were performed successfully and the dogs were recovered without any complication. Mean surgical time was 34.2 ± 4.03 and 37 ± 3.56 in group A and B respectively without significant difference (P>0.05). All hematologic and clinical parameters were within normal range and no significant differences were observed (P>0.05). The vaginal port limited surgical maneuvers ergonomically at the time of manipulation of uterine body.

Conclusions:
Conclusion- The advantages of conventional abdominal laparoscopic ovariohysterectomy using three abdominal portals have been confirmed in veterinary practice and are now being used in well-equipped hospitals 1, 2, 3. With the advantages of transvaginal approach by obtaining more experiences in laparoscopic surgeries, vaginal approaches can replace most abdominal and laparoscopic ovariohysterectomy. The newly introduced transvaginal approach is feasible and has the advantage of reducing abdominal portals, more improvement in cosmesis. Also in limiting abdominal conditions like obesity, intra-abdominal adhesions and excessive or neoplastic mammary tissues the application of less abdominal portals would be preferable which could be facilitated by vaginal approaches.
Bibliography: