TCRF (transcervical resection of Fibroids)

PATIENT INFORMATION

TCRF is a procedure in which the fibroids in lining of the uterus are removed or shaved to make the lining normal (also called resected) with a wire loop. The operation is performed using a hysteroscope, an instrument like a telescope which allows the surgeon to see the inside of the uterus. Special instruments can then be passed along the hysteroscope so that surgical procedures can be carried out. When the hysteroscope carries a wire loop it is called a resectoscope.

Procedure

Fibroids can be:

- **serosal** - just under the outside surface of the uterus
- **intra-mural** - within the muscle wall of the uterus
- **submucous** - just under the inside surface of the uterus

There is evidence to suggest that fibroids that occupy the lining of the uterus may cause IVF failures and miscarriages. Sometimes when women have multiple fibroids operation some of the fibroids may be shaved to get the lining as normal as possible.

In the weeks leading up to the surgery, doctors may prescribe drugs to “thin” the lining of the uterus. These are usually GnRH agonists the procedure is done under a general anaesthetic.

Once asleep, the legs are placed in stirrups. An internal examination will be done and the cervix will be opened slightly, the hysteroscopy will then be inserted in the uterus and a watery solution (Glyciene) will be used to distend the uterus so the doctor can see the inside more clearly.

After checking for any possible problems, the fibroid which occupies the lining of the uterus will be systematically removed. TCRF usually involves no incisions, stitches, drains or bladder catheters. Sometimes an intra venous drip may be needed and a balloon catheter may be left inside the uterus for a few hours. This may be necessary if bleeding is heavier than usual.
Complications

There is a 2-3% incidence of complications during TCRF, such as

1. injury to the cervix,
2. Perforation of the uterus (Hole in the uterus). In this case the procedure will have to be stopped and a laparoscopy (telescope through the umbilicus) will be done to see the damage. The surgery may have to be carried out after a few months. You will be kept overnight for observation.
3. Absorption of the fluid used to distend the uterus, leading to a fluid overload in the body.
4. Bleeding and a balloon may be placed in the uterus
5. Infection. A course of antibiotics will be given to prevent infection. You may need another course of you have a very smelly discharge a few days after the operation.

What happens after the surgery?

There will be some vaginal bleeding but this normally becomes light within 24 hours. Some women experience slight lower abdominal discomfort. Rest is recommended immediately after TCRF.

Normally, women will be able to resume usual activities, including return to work, within 1-2 weeks. The vaginal bleeding will gradually change (usually within 10 days) to a discharge which may continue for several weeks to a month. Women will be asked to return to the hospital for a six-week post op check. Sometimes the procedure will need to be repeated if the fibroid has been very large and could be only partially. In such cases a GnRH injection will be prescribed to shrink the remaining fibroid. A two stage surgery is planned to reduce the risk. A fibroid which is partially in the muscle of the uterus (Intramural) may encroach on the lining once the projecting part is cut. This may need a second operation to remove the remnant of the fibroid.

You will have a scan around 8 weeks after the operation to confirm that the fibroid is no longer affecting the lining of the uterus and you will be informed when you fertility
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treatment would start. As the cervix is not affected, regular smear tests will still be necessary.

Not all women can have TCRF. Sometimes there may be technical difficulties (such as where the uterus is severely tilted)
We remove the fibroids to make your uterus as normal as possible. The best method of removing the fibroids depends on their size, position and number.
There is a possibility that some fibroids may need to be treated again, either because of the size or because IVF treatment is delayed and these fibroids encroach the cavity again.

Discharge home
You may be discharged home the same day, if not, then the following day. If you have any problems
A prescription for painkillers may be provided on discharge.
Pain relief may be required for any cramping discomfort. Paracetamol or any similar medication can be taken at home.
You should return to normal daily life after 7 days
Do not do any exercise for 3-4 weeks.
Do not put anything into the vagina for 2 weeks œ this includes tampons. Avoid baths or swimming for 2 weeks.
Do not have sexual intercourse for 2 weeks.
Following discharge you should contact your GP, for example, high temperature, smelly discharge.