

**Patient
Information**

Laparoscopic Ovarian Diathermy (LOD)

Introduction

You have been given this leaflet to answer some of the questions you may have as you are now on the waiting list for Laparoscopic Ovarian Diathermy (LOD).

What is LOD?

LOD is a surgical treatment for women with polycystic ovaries who have irregular periods or when ovulation does not happen. Its aim is to induce ovulation. This procedure is combined with a dye test done to check your fallopian tubes. Please see leaflet GHPI0457 Laparoscopy and dye test.

LOD involves a laparoscopy (keyhole surgery) under a general anaesthetic (while you are asleep) and is usually done as a day case.

What to expect before your operation?

After your first consultation you will be assessed either by telephone or in the pre-admission clinic. We will check if you are fit for the laparoscopy.

If you are taking the contraceptive pill, there is no need to stop as the surgery is only a day case procedure.

Please avoid unprotected intercourse during the month of your laparoscopy. If there is any chance of you being pregnant your operation will be cancelled.

If you think your surgery date might coincide with your period, please contact your consultant's secretary as we might be able to give you hormone tablets. You will need to take these a week before your expected period. This will postpone your period until after the surgery.

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Department

Gynaecology

Review due

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What happens during the procedure?

The anaesthetist and a gynaecologist will see you before your keyhole surgery to answer any questions you may have.

The surgery takes about 15 minutes.

A few small cuts are made below your belly button for the tubes to enter for examination of your womb, fallopian tubes and ovaries. Small dissolvable stitches are used to close the wound.

This treatment is often successful in inducing ovulation and regular periods.

The findings will be explained to you before you go home.

What are the possible complications?

Many laparoscopic surgeries are completed without problems but the recognised risks are:

- Damage to the bowel, bladder or major blood vessels
- Failure to enter the abdominal cavity
- Uterine perforation
- Bruising
- Shoulder tip pain - this is due to the gas used during surgery
- In extremely rare cases it will be necessary to make a bigger incision than planned; a laparotomy. Should this happen you will need to stay longer in hospital.

After the operation

You may have a sore throat or nausea from the anaesthetic and will be given pain relief.

As mentioned the stitches will dissolve, but may be removed by your GP practice nurse if they irritate you.

You may bathe or shower the next day.

Sexual relations can be resumed as soon as you are comfortable to do so.

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When can I go back to work?

Most patients go back to work in 2 to 3 days, but some take longer. A sick note of up to a week can be given if needed. A letter will be sent to you should you need a follow up appointment.

Contact information

If you have any questions, please contact the fertility nurses on the number below:

Cotswold Fertility Unit

Tel: 0300 422 3128

Monday to Friday, 8:00am to 4:00pm

Website: www.cotswoldfertilityunit.co.uk

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