# Editorial

Since the beginning, larger surgical incisions were an absolute necessity to a successful procedure and specially for tissue retrieval. Exposure was the key to a safe and successful tissue retrieval without contaminating the abdominal wound. Minimal Access Surgery is growing fast but it is facing many ups and down with important instruments. Power morcellation is one of the useful instrument used by laparoscopic surgeons and gynecologists which has given the capacity to perform fibroid removal and supracervical hysterectomy through a small incision.

However, in recent years, several plaintiffs have alleged they emerged from a morcellation procedure with a cancer diagnosis when no risk factors were present prior. Based on an FDA analysis of currently available data, FDA state that approximately 1 in 350 women undergoing hysterectomy or myomectomy for the treatment of fibroids is found to have an unsuspected uterine sarcoma, a type of uterine cancer that includes leiomyosarcoma. At this time, there is no reliable method for predicting or testing whether a woman with fibroids may have a uterine sarcoma.

Because of this risk and the availability of alternative surgical options for most women, the FDA is warning against the use of laparoscopic power morcellators in the majority of women undergoing myomectomy or hysterectomy for treatment of fibroids.

Limiting the patients for whom laparoscopic morcellators are indicated, the strong warning on the risk of spreading unsuspected cancer, and the recommendation that Minimal Access Surgeon share this information directly with their patients, are part of FDA guidance to manufacturers of morcellators.

Since the FDA warning, Johnson & Johnson pulled the device called a laparoscopic power morcellator from the market; many hospitals. But a group of gynecologist believe that the risks of unknown cancer have been overblown and the government should not interfere with patient treatment. The number of gynecologists still employing morcellators is difficult to estimate. According to many gynecologist it is skepticism that the FDA acted too quickly. Although morcellator can be used keeping inside a surgical bag, a controversial solution that some believe could prevent stray bits of tissue.

The American College of Obstetricians and Gynecologists argues that with more stringent patient selection, the device remains an important tool. Let us see what comes ultimately in guideline but in our opinion till new safe technique comes we should stop using power morcellator.

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