or many women, having a hysterectomy seems like a rite of passage. Heavy menstrual bleeding, painful periods, pelvic prolapse and gynecologic cancers are common, and treatment often requires surgery. Hysterectomy is the second most common surgery women undergo—second only to cesarean delivery of a newborn.

Many women are turning to da Vinci robot-assisted surgery when the time for surgery comes. Sandy Kuhlman, a 55-year-old hospice director from Athol in northwest Kansas, came to Salina last year specifically for a da Vinci hysterectomy.
“I had a cousin who’d had the robotic hysterectomy in Nebraska and have known others who’ve had traditional hysterectomies,” Kuhlman says. “I was amazed at how different the recovery was. I’m not a person who deals well with surgery, recovery or being ill. So the idea of a quicker recovery with da Vinci and the fact that I have family in town brought me to Salina.”

Kuhlman came to the hospital early the day of her surgery and was able to leave for home by 5 o’clock that evening.

“I felt no pain,” Kuhlman says. “In fact, I felt so good that I went to work the next day to do some computer training after making a deal with the doctor that I wouldn’t drive and I wouldn’t lift anything.”

Her doctor, Christopher Graber, MD, an Ob–Gyn with Salina Women’s Clinic, says Kuhlman’s outcome, while extraordinary, isn’t necessarily unique.

“There have been a number of women who’ve experienced a recovery similar to Sandy’s,” Graber says. “But typically we tell patients that they can expect to be sore for two to four weeks and that’s usually the time when they can go back to work. We don’t recommend any heavy lifting for a full six weeks after surgery.”

That’s a major improvement over traditional open abdominal hysterectomies, when patients can expect a two- to three-day hospitalization and a four- to six-week recovery.

THE DA VINCI DIFFERENCE
With a da Vinci-assisted hysterectomy, doctors use four small incisions, each half an inch or smaller, versus one large incision along the abdomen required for an open procedure. Instruments are placed inside the patient through the small incisions and connected to the robotic arms of the da Vinci Surgical System. The surgeon then takes a seat at a computer console where a highly magnified, 3-D view allows a clear look at the surgical field, while hand and foot controls are used to manipulate the instruments.

“Patients can be assured that doctors control all the instruments during surgery and that the robot doesn’t make any decisions,” Graber says. “The technology, with its high-definition viewing and zooming capabilities, simply makes our job as surgeons easier.”

The precision of the technology allows for less blood loss and scarring, which translates to significantly less pain, less chance for infection, shorter hospital stays and quicker recovery times.

postoperative benefits to patients in pelvic support, and many patients cite a reduction in pelvic pain when da Vinci versus vaginal hysterectomy is used.”

Graber, along with his partner Merle J. “Boo” Hodges, MD, Salina Women’s Clinic, have been two of the leading performers of da Vinci hysterectomy in Kansas during the past two years.

“We’ve performed well over 300 successful surgeries,” Hodges says. “We’ve had patients throughout the north central Kansas region make the decision to come to Salina Women’s Clinic specifically because of the availability of da Vinci surgery.”

Less pain … less downtime. That’s what every woman facing hysterectomy is looking for.

“I’m fascinated with the technology and how much progress has been made over the years,” Kuhlman says. “As a former hospital nurse, many years ago, I remember many women struggled with recovery after a hysterectomy. A lot has changed since that time, but the fact that I felt perfectly good following my surgery is truly amazing.

“I would recommend da Vinci hysterectomy to whomever asks,” Kuhlman says. “I’ve been fairly vocal to those I’ve known who are needing surgery. Women really need to ask about da Vinci.”