

Report on Round Table Discussion on “**Unnecessary Hysterectomies in young women – Government Guidelines, care givers perspective and the way forward**” organised by the Patna Chapter of the Indian Society of Perinatology and Reproductive Biology (ISOPARB) on 28th December 2024.

Members of the Indian Menopause Society, (Patna Chapter), Patna Obstetrics and Gynecological Society, Indian Fertility Society (Bihar branch) and some eminent Senior Gynecologists of Patna were invited and participated in the discussion, moderated by Dr. Hemali Heidi Sinha, President of the Patna Chapter of ISOPARB, as well as member of the SAHELI consortium.

There was discussion on “Guidelines to prevent unnecessary hysterectomies “ from the MoHFW, circulated in 2023. This had been circulated to all the participants, well in advance.

- 1) All participants unanimously agreed that a lot of hysterectomies were being performed in young women and most were unnecessary and that this being a burning problem required to be addressed.
- 2) All agreed that the guidelines were well written and should have been circulated to all doctors in the Government Sector by the Ministry of Health and to private practitioners by professional bodies. The guidelines though available on the internet (free access) were never publicized, so most practitioners were unaware of them.
- 3) Professional bodies should start outreach programs for practitioners in the periphery, who are the patients’ first point of contact. These practitioners require to be sensitized that:
 - i) Hysterectomy is not the only treatment for all benign Gynecological ailments
 - ii) LNG IUS is a viable and safe alternative, easy to insert, with minimal side effects
 - iii) Patients should be referred to Specialists/Tertiary Care Centres for treatment of their ailment and not for hysterectomy. The patient should be offered hysterectomy, if required, by the doctor to whom the patient has been referred.
 - iv) They should be told about the long term effects of hysterectomy performed at a young age and patients should be counselled by them accordingly
- 4) There should be public forum in state and district level conferences, where women who have undergone hysterectomy at a young age should be invited along with their families, where they could discuss the problems they face. Alternative methods of available treatment for menstrual problems, reproductive tract infections should be discussed. Invitees should include local opinion leaders, as well.
The Patna Chapter of ISOPARB whose conference is due later this year, decided to take this initiative
- 5) LNG IUS should be included as part of the Ayushman Bharat package as medical management. At present, there is no alternative to surgery in this insurance package. When a treatment option (hysterectomy) is available on cashless basis, women covered under this scheme, are reticent to spend even one time, for medical management, despite being explained long term consequences of hysterectomy.
- 6) The print and electronic media should be utilised with good IEC material, to bring about change in the deep rooted misconception.
- 7) Some participants felt that General Surgeons should be prohibited from performing hysterectomies.
- 8) The opinion of at least two specialists should be taken before subjecting women less than 45 years to hysterectomy. This is practised in some Middle East countries.

- 9) ASHA workers could be given an incentive for the hysterectomies they have helped prevent
- 10) It was reiterated that long term complications should be explained to them and their queries must be answered
- 11) LNG IUS use as a contraceptive should be promoted to increase its acceptance and to allay anxiety about its ill effects
- 12) There was discussion on the different brands of LNG IUS. A lot of participants used Emily due to steep difference in the price from Mirena. Both providers as well as the user did not have any complaints and were satisfied, though counselling was required to allay the patient's anxiety that relief would not be instant but over a duration of time. No one has been part of any study comparing the different LNG IUS.
- 13) The discussion closed with an urgent need for monitoring of unnecessary hysterectomies in young women. It was explained that no professional body is authorized for this, though self-audit would be a good beginning.
It was informed that in Bihar the Hysterectomy monitoring Committee had not been constituted, unlike in Tripura, Madhya Pradesh, Kerala and some other states of the country.
There were twenty participants. It was also agreed that the new team of the Patna Obstetrics and Gynecological Society would be approached for disseminating the guidelines to all the members and holding a discussion to create awareness.