Ablation For Uterine Diseases

Dr. Suyash Naval
DNB, FAGLS

Naval Multi Speciality Hospital, Jalgaon

No Conflicts of Interest

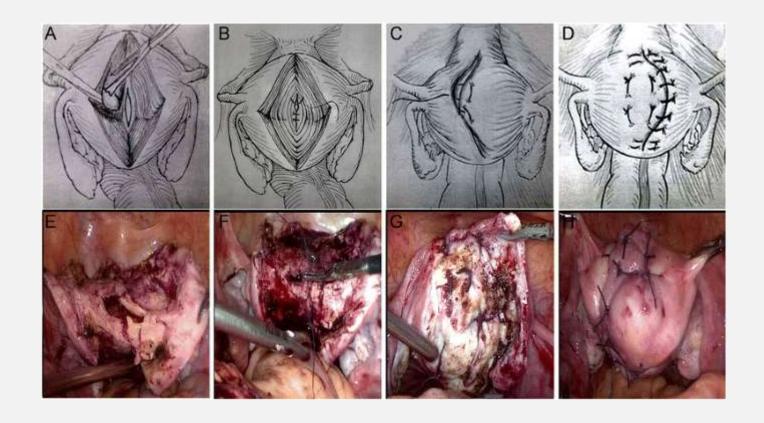
Adenomyosis-The problem with med management

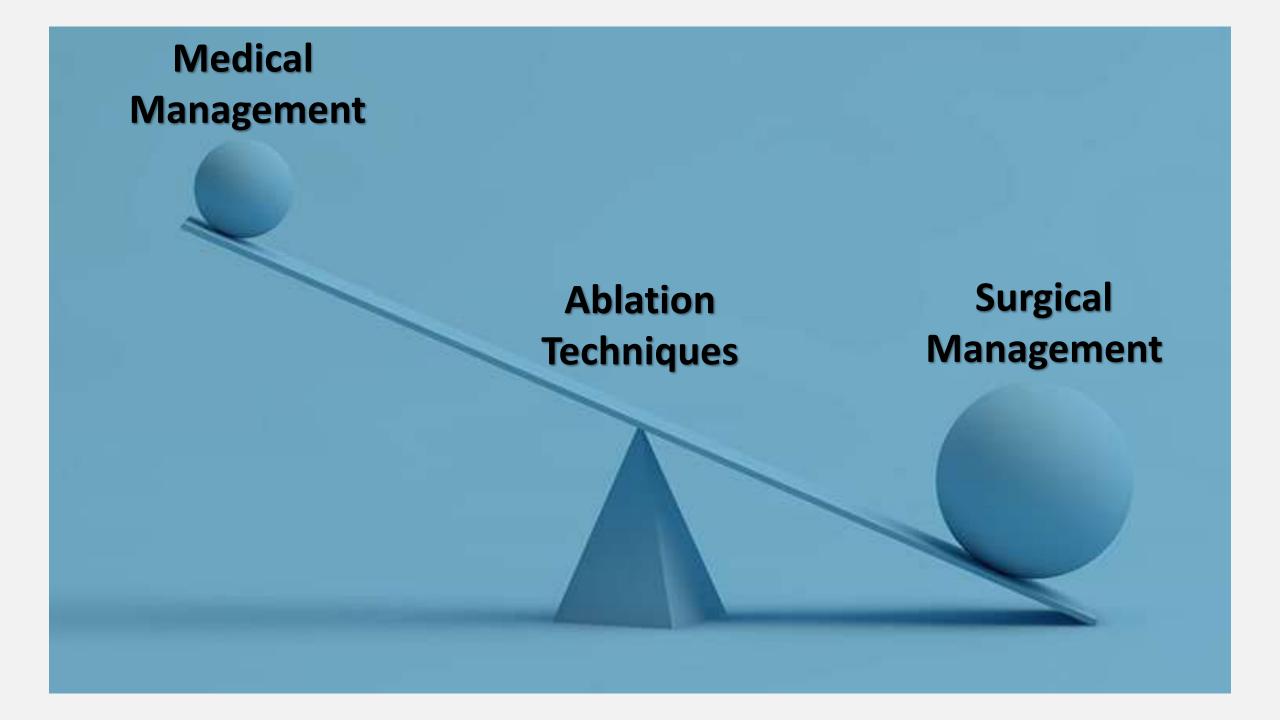
- Success rate
- Rebound disease
- Compliance



The problem with surgical management

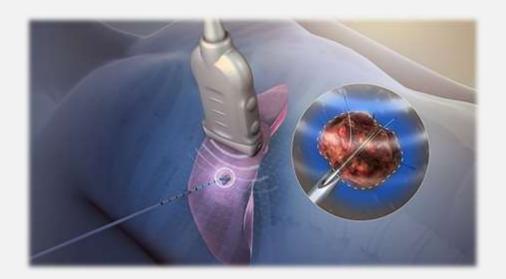
- Expertise
- Residual disease
- Healing
- Complications



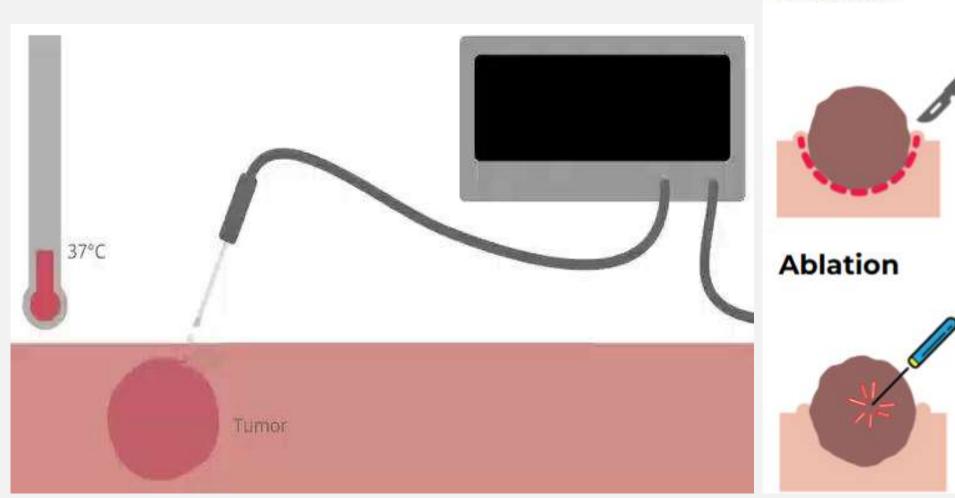


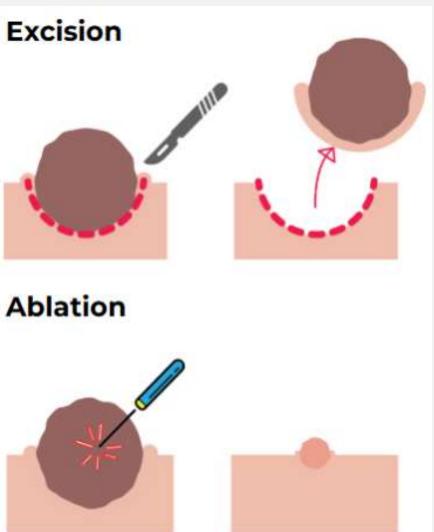
Ablation Techniques

- HIFU
- Radiofrequency
- Microwave
- NTIRE (Non-Thermal Irreversible Electroporation)

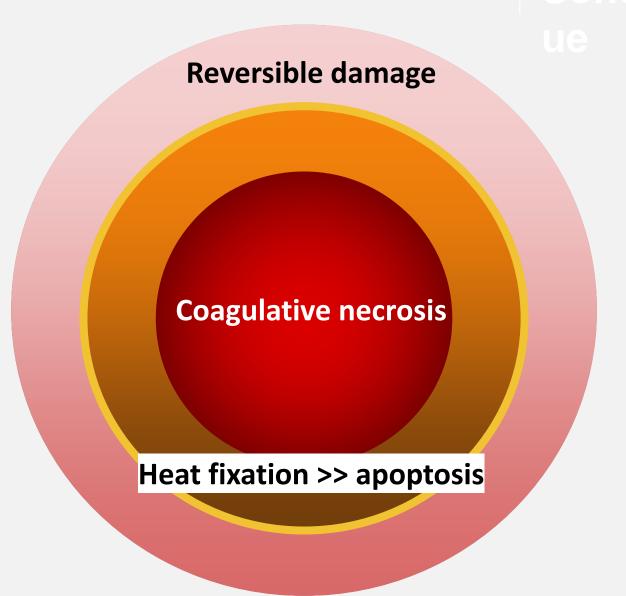


Ablation





Radiofrequency Ablation



Hyperechoic change

Coagulative necrosis

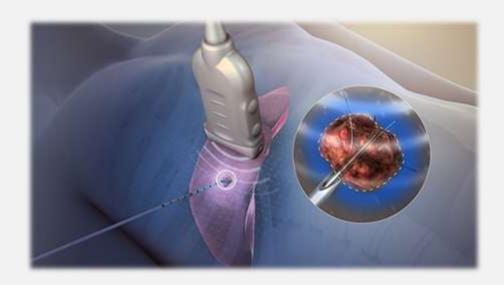
Heat fixation -> apoptosis

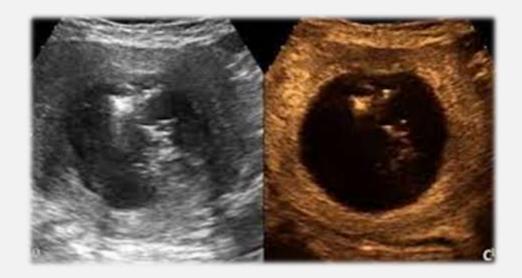
Irreversible damage

Reversible damage

Microwave Ablation

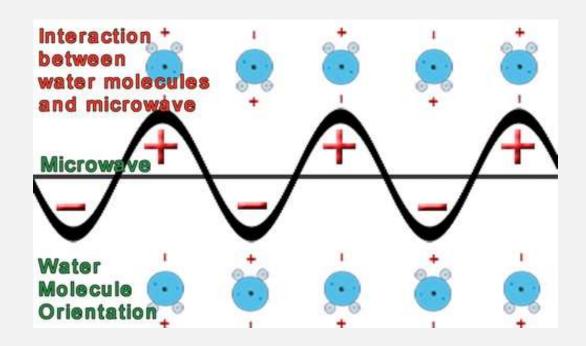
#New #Microinvasive adenomyosis treatment





Microwave physics

A microwave oscillating at 9.2 × 108 Hz, the charge changes signs nearly 2 billion times a second (9.2 × 108 Hz). When an oscillating electric charge from radiation interacts with a water molecule, it causes the molecule to flip.



Microwave Ablation Equipment

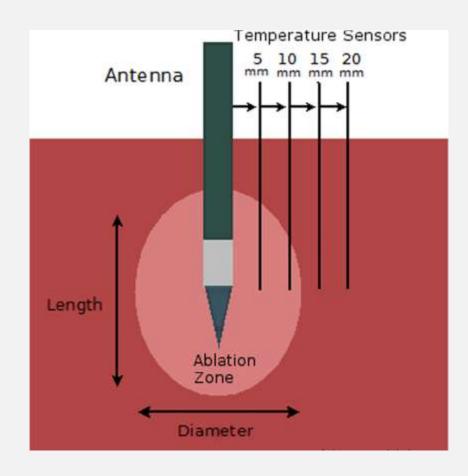




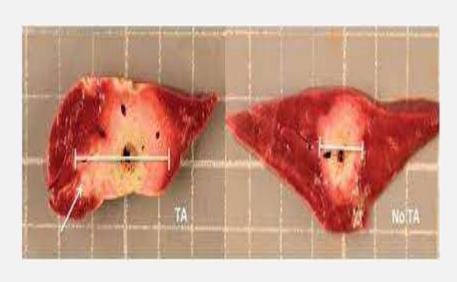
Antenna 15 G, 200 mm

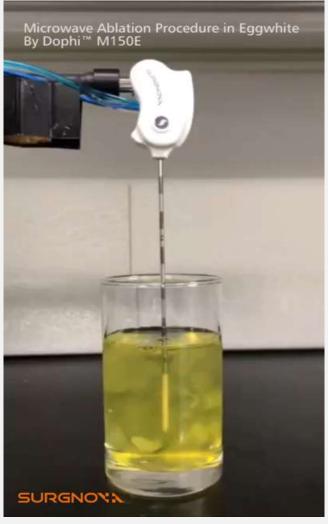
MWA Generator (Canyon Medical)

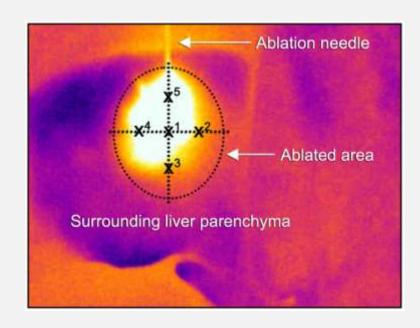
MWA Antenna ablation zone (near spherical & spherical)



Microwave- a powerful & precise energy tool





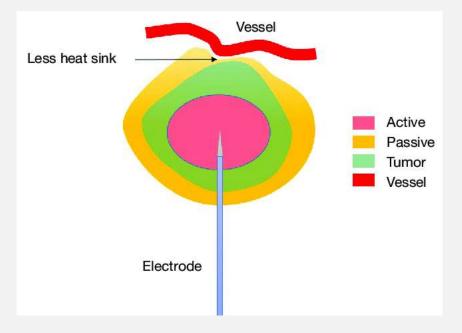


Heat-sink Effect

The "heat sink effect" refers to the cooling impact of nearby blood vessels on tissue during thermal ablation procedures like Radiofrequency Ablation (RFA) or Microwave Ablation (MWA).

When large blood vessels (especially >3 mm in diameter) are near the ablation zone, they carry away heat via blood flow.

This dissipates thermal energy before it can effectively kill nearby tissue.



Ablation approach methods

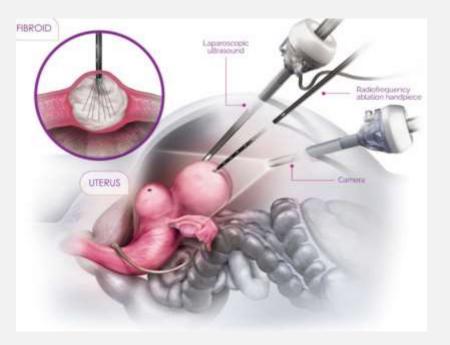
TRANSCERVICAL

TRANSVAGINAL

LAPAROSCOPIC







India's 1st *Microwave Ablation for Fibroid & Adenomyosis

Laparoscopy & USG Guided MWA (LUMWA)





*New microinvasive procedure that saves the uterus from big scar

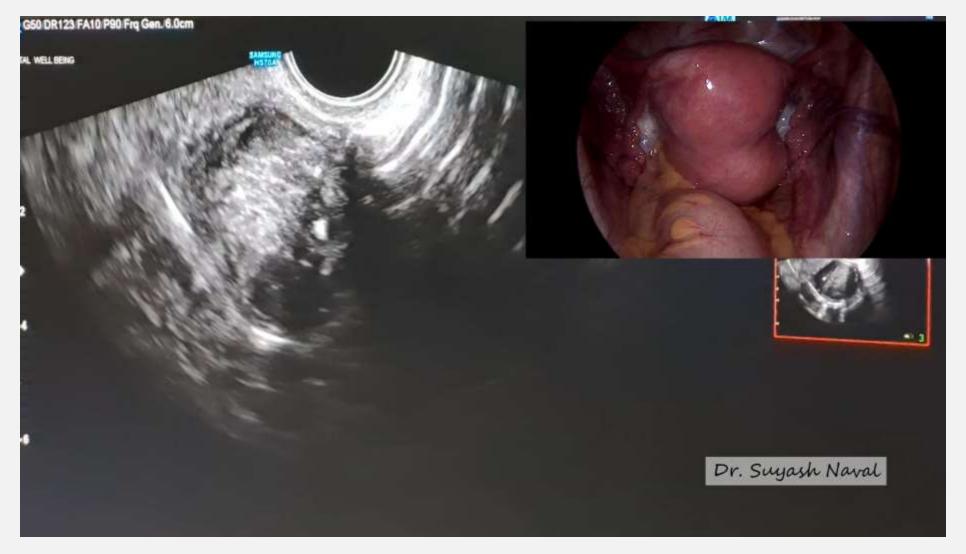
Naval Multi Speciality Hospital, Jalgaon

Fibroid Adenomyosis Clinic & Treatments (FACT)

Case

- 37 yrs old female with 2 living children
- h/o menorrhagia
- USG- Figo type 5 fibroid 6.3 cm x 5.8 cm x 4.9 cm
- Patient desired non surgical treatment.

Laparoscopy & USG Guided MWA Ablation (LUMWA) of Post wall myoma FIGO Type 5-6





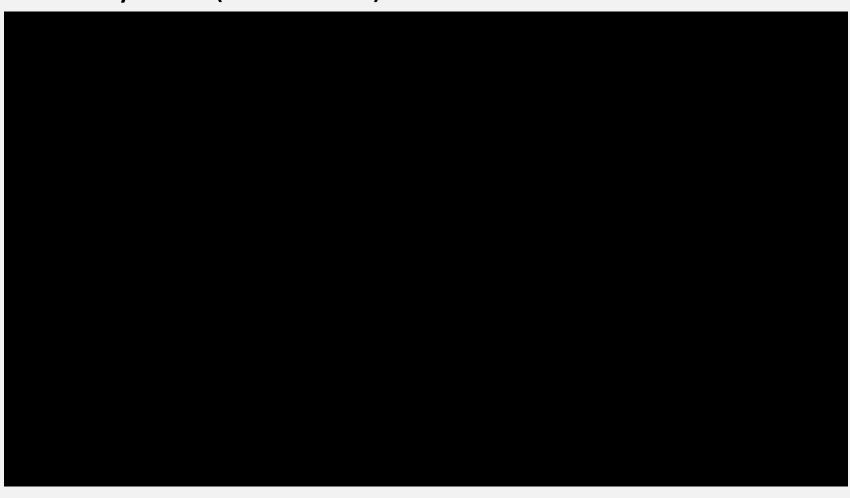
Post operative USG (9 months)



66.6 % volume reduction

LUMWA-

Laparoscopy and USG Guided Microwave Ablation of Adenomyois (diffuse)



How much to ablate?

 The ablation rate is one of the main indicators for evaluating the effect of microwave ablation. In principle, the ablation rate for adenomyosis should exceed 70%. Most reported ablation rates of microwave ablation surpass 90%, and thus meet the ablation standard.

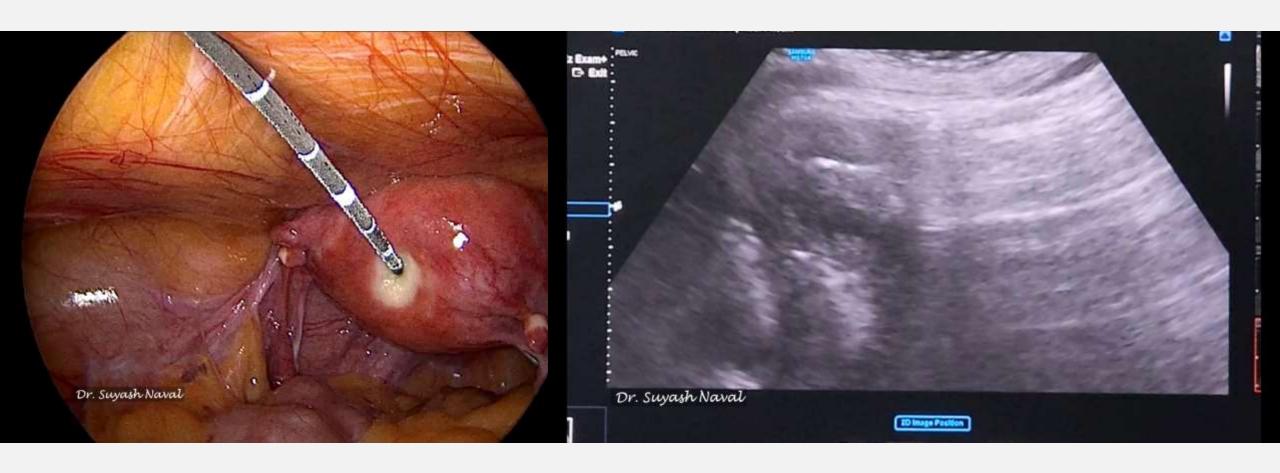
 For patients with incomplete ablation, contrast-enhanced ultrasound or enhanced MRI can be used to timely detect and supplement the ablation.

LUMWA for Adenomyosis (Focal)

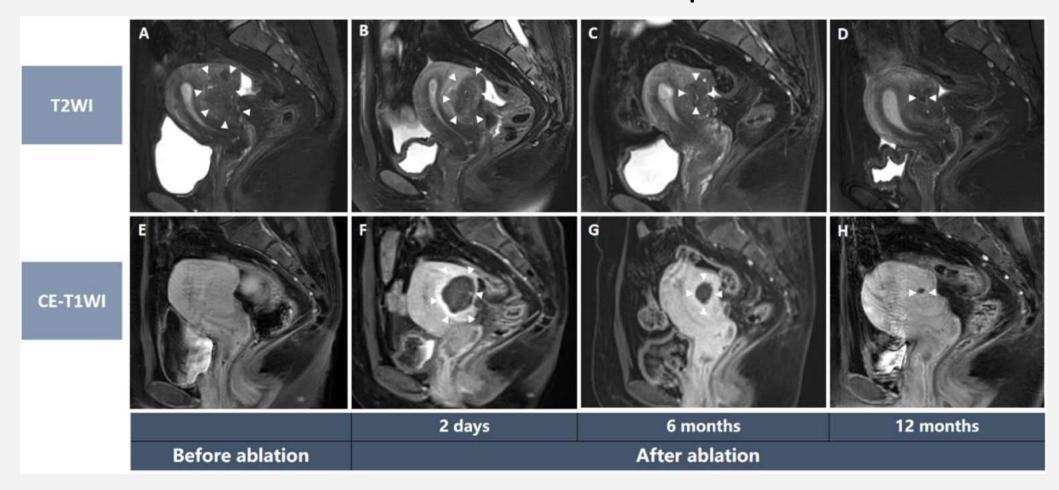
1st Global MWA workshop in India 2024



LUMWA for Adenomyosis



MRI Evaluation and follow up

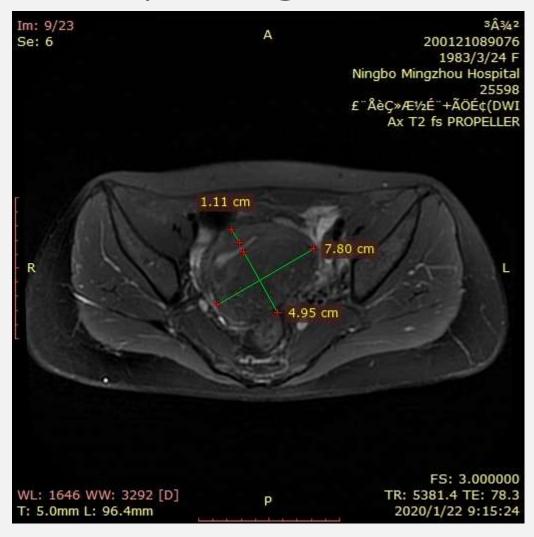


Other evaluation methods- Dysmenorrhoea score, UFS-QOL score, PBAC score, CA-125, Hb levels

Contrast Enhanced USG (CEUS)



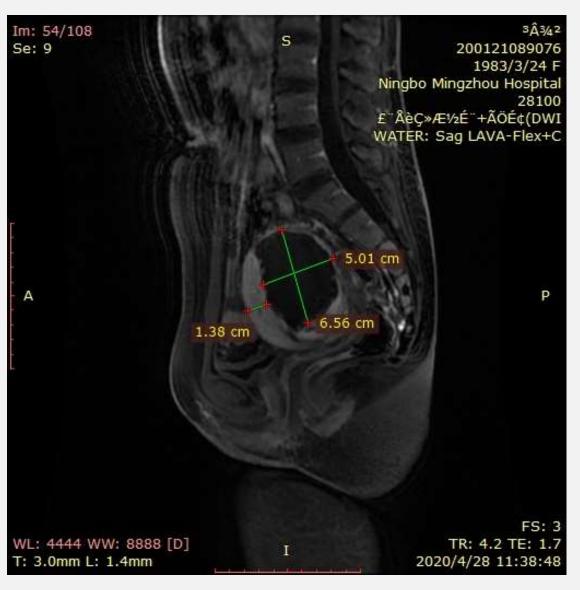
Pre op image





2 weeks post op





- The ablation rate was 79.7–91.34%, the uterine volume reduction rate was 55.2–64.9%, and the nidus volume reduction rate was 64.9–93.1% after 12 months of follow-up.
- After treatment, patients' clinical symptoms significantly improved: the improvement rates of dysmenorrhea, SSS, menstrual disorder, and anemia were 50–81.7%, 20.9–60.2%, 40–80.2%, and 55.6–78.5%, respectively.

scientific reports

```
Explore content > About the journal > Publish with us >
```

```
nature > scientific reports > articles > article
```

```
Article Open access Published: 05 May 2015
```

Ultrasound-guided percutaneous microwave ablation for adenomyosis: efficacy of treatment and effect on ovarian function

Yang Yu, Zhang Jing, Han Zhi-yu, Ma Xia, Hao Yan-li, Xu Chang-tao, Xu Rui-fang & Zhang Bing-song

 US-guided PMWA is an effective method in the treatment of adenomyosis, has no significant impact on ovarian function and fertility and should be considered as an alternative to hysterectomy in women of reproductive age.

Ablation and fertility

- In the early days of magnetic resonance-guided (MRg)-HIFU treatment, case reports
 of pregnancies showed successful vaginal delivery at term, and none had
 complications during pregnancy and labour.
- Some larger studies, including individual and multicentre collaborative trials, have also confirmed successful pregnancies after HIFU ablation for fibroids and adenomyosis.
- As many studies were from China, the authors had reported a high rate of induced abortions and miscarriage in pregnancies after HIFU treatment for fibroids and adenomyosis.
- However, it might be related to the fertility regulation in the past. It is also possible that maternal age and sizable fibroids after HIFU may also influence the miscarriage rate in any study, as both factors can independently adversely impact miscarriages.

Complications

- Pain
- Vaginal Discharge (7-88%)
- Fever
- Infection
- Thermal damage



Ideal patient

- Poor response to med therapy
- Big disease
- No desire for fertility
- Does not want hysterectomy

Combined treatment

- Ablation + Dienogest
- Ablation + LNG-IUD

Probably gives the best results as reflected in upcoming data

Research status today

- Most studies are single armed.
- Lack of level 1 evidence.
- Case series and case reports are plenty.

Conclusion

 Ablation appears to be a feasible new non-surgical way of treating adenomyosis whilst saving the uterus.

Ablation is a not a curative but a palliative therapy.

 Role of ablation in improving fertility needs to be evaluated with RCTs.



+91 8888829589

navalsuyash@gmail.com

2nd Global MWA Workshop on 1st Nov 2025 Hyderabad with EFI and Nuvarium Academy