Uterosacral Nerve Ablation Failed to Help Chronic Pelvic Pain

BY MARY ANN MOON

Uterosacral nerve ablation via laparoscopic failed to improve chronic pelvic pain, dysmenorrhea, dyspareunia, and quality of life in a clinical trial four times larger than any previously published study of the issue, according to a report in JAMA.

Laparoscopic uterosacral nerve ablation (LUNA), using either lasers or electrodiathermy, has become increasingly popular for chronic pelvic pain, even though systematic reviews of the evidence have been “inconclusive” as to the procedure’s benefit. “Clinicians’ beliefs about LUNA’s effectiveness vary widely, and LUNA remains a controversial procedure,” reported Jane Daniels of Birmingham (England) Women’s Hospital, and her associates.

The investigators performed a randomized study of 487 women with chronic pelvic pain undergoing laparoscopic for a differential diagnosis at 18 British hospitals. Intraoperatively, the women were assigned to undergo immediate LUNA or no nerve ablation. The women were blinded to their treatment assignment.

“The ablation was performed as close to the posterior aspect of the cervix as possible and continued for a minimum of 1 cm posterolaterally on either side with the intended aim of destroying the sensory nerve fibers and the secondary ganglia as they left the uterus and lie within the uterosacral ligaments,” Ms. Daniels and her colleagues noted. “Full or partial transection of the ligaments was achieved bilaterally with laser or electrodiathermy, according to the surgeon’s preference.”

Median follow-up was 69 months. The patients assessed their pain and health-related quality of life at 3 and 6 months, and 1, 2, 3, and 5 years post procedure. The investigators found no differences between women who had LUNA and those who did not in terms of severity of chronic pelvic pain, dysmenorrhea, or dyspareunia at any of those time points, Ms. Daniels and her colleagues reported (JAMA 2009;302:955-61).

There also was no difference in health-related quality of life. One year after the procedure, the two groups reported a similar number of visits to their general practitioners and a similar number of days off from work.

There were eight cases of minor hemorrhaging during the LUNA procedure and one case that required conversion to an open surgery. The investigators reported no financial conflicts of interest.