

↗ No differences were found with regard to:

- → pregnancy rates
- postoperative complaints
- menstrual irregularities

Pomeroy vs electrocoagulation: major morbidity

Comparison:	02	Modified Pomeroy versus electrocoagulation
Outcome:	03	Major morbidity, details

Study	Pomeroy n/N	Coagulation n/N) OR Fixed)	Weight %	Peto OR (95%ClFixed)	
D1 Procedure related injuries	requiring additional op	eration or blood trans	sfusion				
Sitompul 1984	1/197	1/98 ↔			<u> </u>	0.47[0.02,8.92]	
WHO 1982	5/791	1/819	_	8	→ 33.2	3.95[0.79,19.61]	
Subtotal(95%Cl)	6/988	2/917			43.0	2.43[0.59,9.92]	
Chi-square 1.55 (df=1) P: 0.4	46 Z=1.23 P: 0.2						
02 Re-hospitalisation as a co	onsequence of operatio	n					
Sitompul 1984	11 / 197	1/98			→ 57.0	3.21[0.94,10.91]	
Subtotal(95%Cl)	11 / 197	1/98	-		→ 57.0	3.21[0.94,10.91]	
Chi-square 0.00 (df=0) P: 1.0	00 Z=1.87 P: 0.06						
Total(95%Cl)	17 / 1185	3/1015			⊷ 100.0	2.84[1.13,7.16]	
Chi-square 1.64 (df=2) P: 0.6							
		.1 Fa	.2 avours treatment	5 Favours c	10 ontrol		

Pomeroy vs electrocoagulation: minor morbidity

Comparison: 02 Modified Pomeroy versus electrocoagulation Outcome: 05 Minor morbidity, details

	Pomeroy	 Coagulatio	on Pete	o OR Weig	jht Peto OR	
Study	n/N	n/N	(95%CI	Fixed) %	(95%Cl Fixed)	
01 Procedure related injuries wit	th no additional ope	eration				
VVHO 1982	1 / 791	2/819		2.7	0.53[0.06,5.11]	
Subtotal(95%Cl)	1 / 791	2/819	<	2.7	0.53[0.06,5.11]	
Chi-square 0.00 (df=0) P: 1.00 🕻	Z=-0.55 P: 0.6					
02 Urogenital infections						
VVHO 1982	18 / 791	23/819			0.81[0.43,1.50]	
Subtotal(95%Cl)	18/791	23/819		- 35.5	0.81[0.43,1.50]	
Chi-square 0.00 (df=0) P: 1.00 🕻	Z=-0.68 P: 0.5					
03 Wound infection						
WHO 1982	49 / 791	20/819		58.7	2.49[1.54,4.04]	
Subtotal(95%Cl)	49 / 791	20/819			2.49[1.54,4.04]	
Chi-square 0.00 (df=0) P: 1.00 🕻	Z=3.72 P: 0.0002					
04 Post operative temperature >	38 C without hosp	italisation				
Sitompul 1984	3/197	1/98		■ → 3.1	1.45[0.18,11.77]	
Subtotal(95%Cl)	3/197	1/98		→ 3.1	1.45[0.18,11.77]	
Chi-square 0.00 (df=0) P: 1.00 🕻	Z=0.35 P: 0.7					
Total(95%Cl)	71 / 2570	46 / 2555			1.58[1.09,2.28]	
Chi-square 8.85 (df=3) P: 0.06 []		4072000		100.0	1.00[1.00[2.20]	
	2-2.42 F. 0.02					
			.1 .2	i <u>5</u> 10		
			Favours treatment	Favours control		

Pomeroy vs electrocoagulation: postoperative pain

Comparison: 02 Modified Pomeroy versus electrocoagulation Outcome: 12 Complaints

		omeroy Coagulatio n/N n/N		on Peto OR (95%Cl Fixed)		Peto OR (95%Cl Fixed)	
			100 1		%	loo non rinou)	
01 Post operative pain, ≺ 24 h							
Sitompul 1984	90 / 197	15/98		@	16.3	3.75[2.26,6.21]	
VVHO 1982	120 / 791	30/819			36.9	3.90[2.79,5.46]	
Subtotal(95%Cl)	210/988	45/917		-	53.3	3.85[2.91,5.10]	
Chi-square 0.02 (df=1) P: 0.99 Z	=9.45 P: <0.00001						
02 Post operative analgesic use							
Subtotal(95%Cl)	100 / 791	96/819		+	46.7	1.09[0.81,1.47]	
Chi-square 0.00 (df=0) P: 1.00 Z	=0.56 P: 0.6						
03 Persistent pain at follow-up vi:	sit						
WHO 1982	100 / 791	96/819			46.7	1.09[0.81,1.47]	
Subtotal(95%Cl)	0/0	0/0	ĸ		0.0	0.00[0.00,0.00]	
Chi-square 0.00 (df=0) P: 0.00 Z	=0.00 P: (null)		•				
	240 / 4770	444 44700			400.0	0.44/4 74.0.001	
Total(95%Cl)	310/1779	141 / 1736		-	100.0	2.14[1.74,2.62]	
Chi-square 36.58 (df=2) P: 0.00 .	Z=7.28 P: <0.00001						
			.1 .2	1 5	10		
4			Favours treatment	Favours con	trol		

Tubal ring vs electrocoagulation: postoperative pain

Comparison: 03 Tubal ring versus electrocoagulation Outcome: 12 Complaints

	Ring	Coagulation		Weight	Peto OR
Study	n/N	n/N	(95%Cl_Fixed)	%	(95%Cl Fixed)
01 Post operative pain, < 24 h					
Aranda 1976	47/147	29/151	——33 ——	26.7	1.95[1.16,3.29]
Koetsawang 1978	78/148	24/150	— B —	- 31.6	5.08[3.15,8.19]
Subtotal(95%Cl)	125 / 295	53 / 301		58.4	3.28[2.31,4.66]
Chi-square 7.03 (df=1) P: 0.03 Z	=6.62 P: <0.0000	1			
02 Post operative analgesic use					
Aranda 1976	16/147	7 / 151	_	10.0	2.40[1.03,5.61]
Subtotal(95%Cl)	16/147	7 / 151		10.0	2.40[1.03,5.61]
Chi-square 0.00 (df=0) P: 1.00 Z	=2.02 P: 0.04				
03 Persistent pain at follow-up vi	isit				
Aranda 1976	4/146	2/150	D	→ 2.8	2.03[0.40,10.18]
Koetsawang 1978	45/148	41 / 150		28.9	1.16[0.70,1.91]
Subtotal(95%Cl)	49 / 294	43 / 300		31.6	1.22[0.76,1.97]
Chi-square 0.42 (df=1) P: 0.81 Z	=0.81 P: 0.4				
Total(95%Cl)	190 / 736	103 / 752		100.0	2.32[1.78,3.04]
Chi-square 18.13 (df=4) P: 0.00				,00.0	2.02[1.1.0]0.04]
	2-0.15 P. <0.000				
		.1	.2 1 5	10	
		F	Favours treatment Favours cont	rol	



No statistically significant differences:
 major, minor morbidity
 efficacy
 technical failures

Pomeroy vs clip (n=200)

Similar
 minor morbidity
 menstrual irregularities
 Pomeroy:1 pregnancy



↗ Similar:

major, minor complications

Risk of pregnancy after tubal sterilisation

↗ follow-up: 8-14 years unipolar/bipolar coagulation → spring clip

partial/total salpingectomy

Peterson 1995

Risk of pregnancy after tubal sterilisation

cumulative 10-years probability:
 overall: 18.5/1000
 clip: 36.5/1000
 unipolar coagulation
 /pp partial salpingectomy: 7.5/1000

→ Peterson 1995

Risk of pregnancy after tubal sterilisation

18-27 years:
unipolar coagulation: 3.7/1000
clip: 52.1/1000
bipolar: 54.3/1000
34-44 years:
unipolar coagulation: 1.8/1000
clip: 18.2/1000

Risk of ectopic pregnancy

↗ 10 year cumulative probability/1000:

- Bipolar coagulation
- ◄ Unipolar coagulation

- Interval partial salpingectomy
- → Postpartum partial salpingectomy 1.5 (0.0-3.6)

7.3 (5.0-9.6)

17.1 (9.8-24.4)

1.8(0.0-5.2)

7.3 (1.6-12.9)

8.5 (1.0-16.0)

7.7 (0.0-15.9)

Peterson 1997



- 11 232 women, 18-44 years
 cumulative probability of regret after 14 years:
- Age groups:
 ↗ 18-30 : 20.3%
 ↗ > 30: 5.9%



Quinacrine

 1920s developed as anti-malarial drug
 1970s intrauterine use in 1100 women, up to 50 000 women treated until 1992



- three instillations to achieve adequate efficacy
- CNS excitations
- **7** ? 3 deaths
- → ? Carcinogenic



- - seems to be associated with less minor morbidity
 - less postoperative discomfort
 - ↗ minimal or no scarring
- Culdoscopy
 - no obvious advantages



- Major morbidity is rare with any method
 Failure rates low in RCTs with short followup (up to 2 years)
- Higher failure rates
 - ↗ longer follow-up (up to 14 years)
 - → young age at sterilisation (<30 years)
 </p>
 - inexperienced surgeons



- Risk of ectopic pregnancy is increased especially after bipolar coagulation
- No evidence of menstrual abnormalities are evident after tubal sterilisation
- Higher incidence of regret is observed after sterilisation at young age (<30 years)</p>