

Should a woman's ovaries be removed during a hysterectomy for noncancerous disease?

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While ovary removal during hysterectomy protects against future risk of ovarian cancer, the decision to conserve the ovaries and the hormones they produce may have advantages for preventing heart of Women's Health, Executive Director of the disease, hip fracture, sexual dysfunction, and cognitive decline. Other than a woman's cancer risk, the most important factor that should determine ovarian conservation vs. removal is her age—whether she is older or younger than 50—according to a Review article published in Journal of Women's Health, a peer-reviewed publication from Mary Ann Liebert, Inc., publishers.

Catherine Matthews, MD, University of North Carolina, Chapel Hill, emphasizes the difficult choice women must often make in the article "A Critical Evaluation of the Evidence for Ovarian Conservation Versus Removal at the Time of Hysterectomy for Benign Disease."

Conflicting data regarding the potential benefits of removing a woman's healthy ovaries at the time of a hysterectomy have led to confusion. When there is no acute reason to remove a woman's ovaries at the time of hysterectomy and she has no increased genetic risk for ovarian cancer, the accumulated data indicate that elective bilateral ovary removal should be discouraged in women younger than 50 years. The withdrawal of ovarian hormones can have negative health consequences in this population. However, in postmenopausal women, it is advisable to remove the ovaries to protect against ovarian cancer, as the medical literature shows that elective ovary removal is not likely to have an adverse effect on heart disease, hip fracture, sexual dysfunction, or cognitive function at this stage of a woman's life.

"As 600,000 hysterectomies for benign disease are performed annually in the U.S. alone, it is

imperative that we have clear guidelines for retaining versus removing normal ovaries," says Susan G. Kornstein, MD, Editor-in-Chief of Journal Virginia Commonwealth University Institute for Women's Health, Richmond, VA, and President of the Academy of Women's Health.

Provided by Mary Ann Liebert, Inc



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