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Laparoscopic helium plasma coagulation for the treatment of endometriosis

Understanding NICE guidance –
information for people considering
the procedure, and for the public



Ordering information

You can download the following documents from www.nice.org.uk/IPG171

- this booklet
- the full guidance on this procedure.

For printed copies of the full guidance or information for the public, phone the NHS Response Line on 0870 1555 455 and quote:

- N1033 (full guidance)
- N1034 (information for the public).

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About this information

The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health. One of NICE's roles is to produce guidance (recommendations) on whether interventional procedures are safe enough and work well enough to be used routinely in the NHS in England, Wales and Scotland.

This information describes the guidance that NICE has issued on a procedure called laparoscopic helium plasma coagulation. It is not a complete description of what is involved in the procedure – the patient's healthcare team should describe it in detail.

NICE has looked at whether laparoscopic helium plasma coagulation is safe enough and works well enough for it to be used routinely for the treatment of endometriosis.

To produce this guidance, NICE has:

- looked at the results of studies on the safety of laparoscopic helium plasma coagulation and how well it works
- asked experts for their opinions
- asked the views of the organisations that speak for the healthcare professionals and the patients and carers who will be affected by this guidance.

This guidance replaces the previous guidance on laparoscopic helium plasma coagulation of endometriosis (which was interventional procedure guidance number 54). To produce this guidance, NICE undertook a review of all the published studies on laparoscopic helium plasma coagulation for the treatment of endometriosis.

This guidance is part of NICE's work on 'interventional procedures' (see 'Further information' on page 10).

About the procedure

The endometrium is the medical term for the inner lining of the uterus (womb). Women with endometriosis have patches of endometrium outside the uterus. These patches are often in the lower abdomen, but they can be in other parts of the body. Although many women with endometriosis do not have any symptoms, some have abdominal pain, pain during sex (known as dyspareunia), painful periods (dysmenorrhoea) or are infertile.

Most women with endometriosis can be treated with painkillers and hormone treatments. Patients who do not improve may be offered an operation. This usually involves using an electrically heated needle or a laser to destroy the patches. Patients with very severe symptoms may be offered an operation to remove their uterus (and sometimes ovaries). This is called a hysterectomy.

Laparoscopic helium plasma coagulation involves passing a very fine flexible telescope (a laparoscope) through a small cut in the abdomen. This instrument is used to direct a thin beam of special helium gas onto the unwanted patches of endometrium. This beam destroys these patches.

How well the procedure works

What the studies said

Different studies assessed symptoms after the procedure in different ways, which made it difficult to compare them. Three studies reported improved symptoms in 49%, 72% and 81% of women, 3 months after the procedure. In another study, 38% of patients (that is, 5 out of 13) still had symptoms at 14 months after the procedure.

The impact of this procedure on the women's fertility was reported in one study of 50 women. This study included 9 women who were infertile at the beginning of the study and 15 women who were infertile and also had symptoms of endometriosis. In all, 44% (4/9) of women who were infertile conceived within 6 months of having the procedure, and 20% (3/15) of women who were infertile and who also had symptoms of endometriosis had conceived within 6 months.

In one of the studies none of the 250 procedures had to be changed to open surgery, and no-one had to be readmitted after 3 months. In another study 16% (5/31) of patients needed to have the procedure again; this study also reported that patients took an average of 12 days to return to normal daily activities. There was no long-term follow-up of patients for longer than 6 months in the published studies looked at.

What the experts said

The experts noted that the procedure may cause less lateral burning (burning of the tissue surrounding the endometrial deposit) than the diathermy technique, and may allow patients to be treated on a day-case basis.

Risks and possible problems with the procedure

What the studies said

Three studies recorded no side effects or problems related to the procedure in a total of 130 women. In another study, 250 women were followed up 3 months after the procedure and no major problems were found.

What the experts said

The experts said that problems might include damage to normal tissue, bowel injury, haemorrhage (bleeding), infection and, potentially, helium embolisation (where the helium causes blockages in blood vessels).

What has NICE decided?

NICE has decided that, if a doctor wants to carry out laparoscopic helium plasma coagulation, he or she should make sure that the patient understands what is involved and that there are still uncertainties over how well it works. There should be special arrangements in place so that the patient only agrees (consents) to the procedure after this discussion has taken place.

NICE has pointed out that clinicians who carry out laparoscopic helium plasma coagulation should have adequate training before performing the procedure.

NICE has said that further information on how well laparoscopic helium plasma coagulation works will be helpful. NICE may look at this procedure again if more information becomes available.

What the decision means for you

Your doctor may have offered you laparoscopic helium plasma coagulation for treating endometriosis. NICE has considered this procedure because it is relatively new. NICE has decided that there are uncertainties about the benefits and risks of laparoscopic helium plasma coagulation which you need to understand before you agree to it. Your doctor should discuss the benefits and risks with you. Some of these may be described above.

Further information

You have the right to be fully informed and to share in decision-making about the treatment you receive. You may want to discuss this guidance with the doctors and nurses looking after you.

The NICE website (www.nice.org.uk) has further information about NICE, the Interventional Procedures Programme and the full guidance on laparoscopic helium plasma coagulation that has been issued to the NHS. The evidence that NICE considered in developing this guidance is also available from the NICE website.

If you have access to the internet, you can find more information on endometriosis on the NHS Direct website (www.nhsdirect.nhs.uk).

You can also phone NHS Direct on 0845 46 47.

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