




Treatment of hydatidiform mole using manual vacuum aspiration: technical and tactical aspects

Antonio Braga ^{1,2}, Lilian Padrón,³ Jorge Rezende-Filho,¹ Kevin Elias,⁴ Neil Horowitz,⁴ Ross Berkowitz⁴

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For numbered affiliations see end of article.

Correspondence to

Dr Antonio Braga, Obstetrics and Gynecology, Federal University of Rio de Janeiro, Rio de Janeiro 22240-003, Brazil; bragamed@yahoo.com.br

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Hydatidiform mole (HM) represents the benign spectrum of gestational trophoblastic disease (GTD), an abnormal pregnancy characterized by aberrant fertilization of the oocyte.¹ The treatment of HM is uterine evacuation, usually done through electric vacuum aspiration (EVA). However, numerous conditions—including legal, religious, and economic—prevent several countries from having access to the devices used to perform EVA. In Brazil the vast majority of GTD Reference Centers do not have EVA, so more than 70% of HMs are treated with manual vacuum aspiration (MVA).² The aim of this video article is to present a representative case where MVA is used for evacuation of HM (Video 1).

After approval by the Rio de Janeiro Federal University Institutional Review Board in February 2021 (number: 4.555.188) and obtaining written informed consent from the patient, we describe a case of a patient at 12 weeks gestation who was referred to our institution due to bleeding, uterus larger than gestational age, human chorionic gonadotropin of 178 678 IU/L, and ultrasonography suggesting HM. She underwent uterine MVA for the treatment of a molar pregnancy.

In the video we show the MVA technique for the treatment of HM, as well as strategies to make the surgery safer and more effective (see also online supplemental tables 1 and 2). There are two important tips for performing molar MVA: the first is to have two aspiration syringes, which makes the procedure more efficient, and the second is to perform cervical dilation with the plastic cannulas themselves, minimizing the risk of perforation.³ Ultrasonography guidance during the procedure assists in monitoring uterine evacuation, avoiding uterine perforation, and helping to ensure complete evacuation. When the contents of the syringe become pink and bullous, it is a sign that the uterine cavity is empty.⁴ A gentle uterine sharp curettage after molar evacuation is important to remove any adherent trophoblastic tissue remnants.

Author affiliations

¹Department of Obstetrics and Gynecology, Federal University of Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brazil

²Department Maternal Child, Federal Fluminense University, Niteroi, Rio de Janeiro, Brazil

³Gynecology Institute, Federal University of Rio de Janeiro, Rio de Janeiro, Brazil

⁴Department of Obstetrics and Gynecology, Division of Gynecologic Oncology, Brigham and Women's Hospital, Harvard Medical School, Boston, Massachusetts, USA

Twitter Antonio Braga @BragaDTG

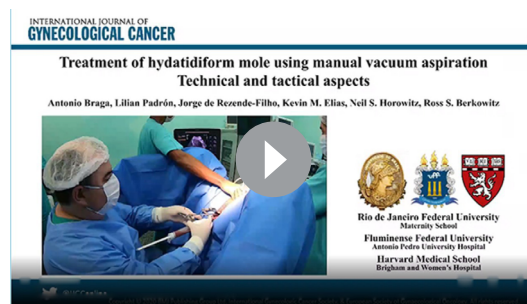
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Video 1 Uterine evacuation by manual vacuum aspiration guided by ultrasonography for the treatment of hydatidiform mole. This video shows that manual vacuum aspiration can replace electric vacuum aspiration in settings that do not have electrical equipment formolar evacuation. This simple, effective, and inexpensive method can be a safe alternative for uterine evacuation in cases of hydatidiform mole.



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Video article

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ORCID iD

Antonio Braga <http://orcid.org/0000-0002-2942-6182>

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