Objective: describing accumulated experience gained from performing Total Laparoscopic Hysterectomy (TLH) at the Clínica del Prado. Methodology: this was a descriptive, retrospective study (evidence level III) which involved patients who underwent TLH in the Gynaecological Endoscopic Unit at Clínica del Prado, Medellín, Colombia. 1,150 medical records from patients operated on between December 2002 and April 2008 were reviewed; those in which at least 90% of the data required by a predesigned instrument could be recovered were included for analysis. Main outcomes measured: demographic data, surgical indication, laparoconversion rate and causes, surgical time, estimated blood loss, uterine weight and height, time of hospital stay and complications. Results: 837 patients were included; TLH was entirely performed on 822 of them by laparoscopy whilst 15 (1.7%) required laparoconversion. The most frequent indications for surgery were fibroids (43.8%) and abnormal uterine bleeding (36.1%). Mean age was 42.7. 83.8% of the patients were ASA I (American Society of Anesthesiologists); the main comorbidity found was hypertension (9.9%). Mean surgical time was 85.9 minutes; mean estimated blood loss was 60.6 mL. The commonest histological diagnosis was fibroids (57.1%). Mean uterine weight was 180 grams and mean uterine height 10.2 cm. Complications affected 12.5% of the 837 patients, 3.1% of them being major ones. Conclusions: TLH is a safe and replicable procedure. It requires a short hospital stay and has a low complication rate, similar to that found in the literature.

Keywords
Total laparoscopic hysterectomy, complication, surgical time.