

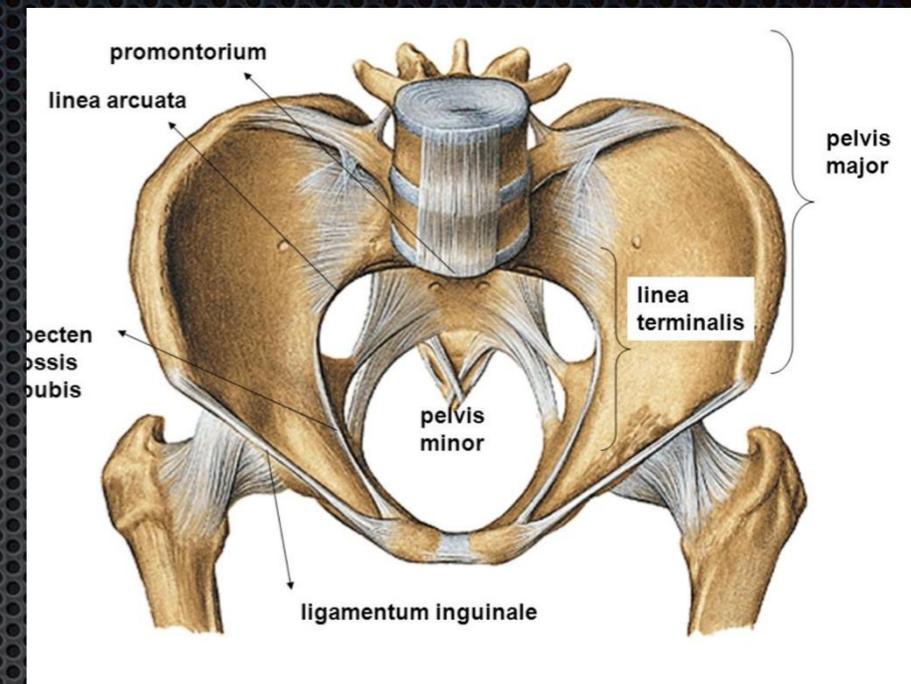
Promonto-fixation sous coelioscopie Bases anatomiques

O Garbin
CHU de Strasbourg
France

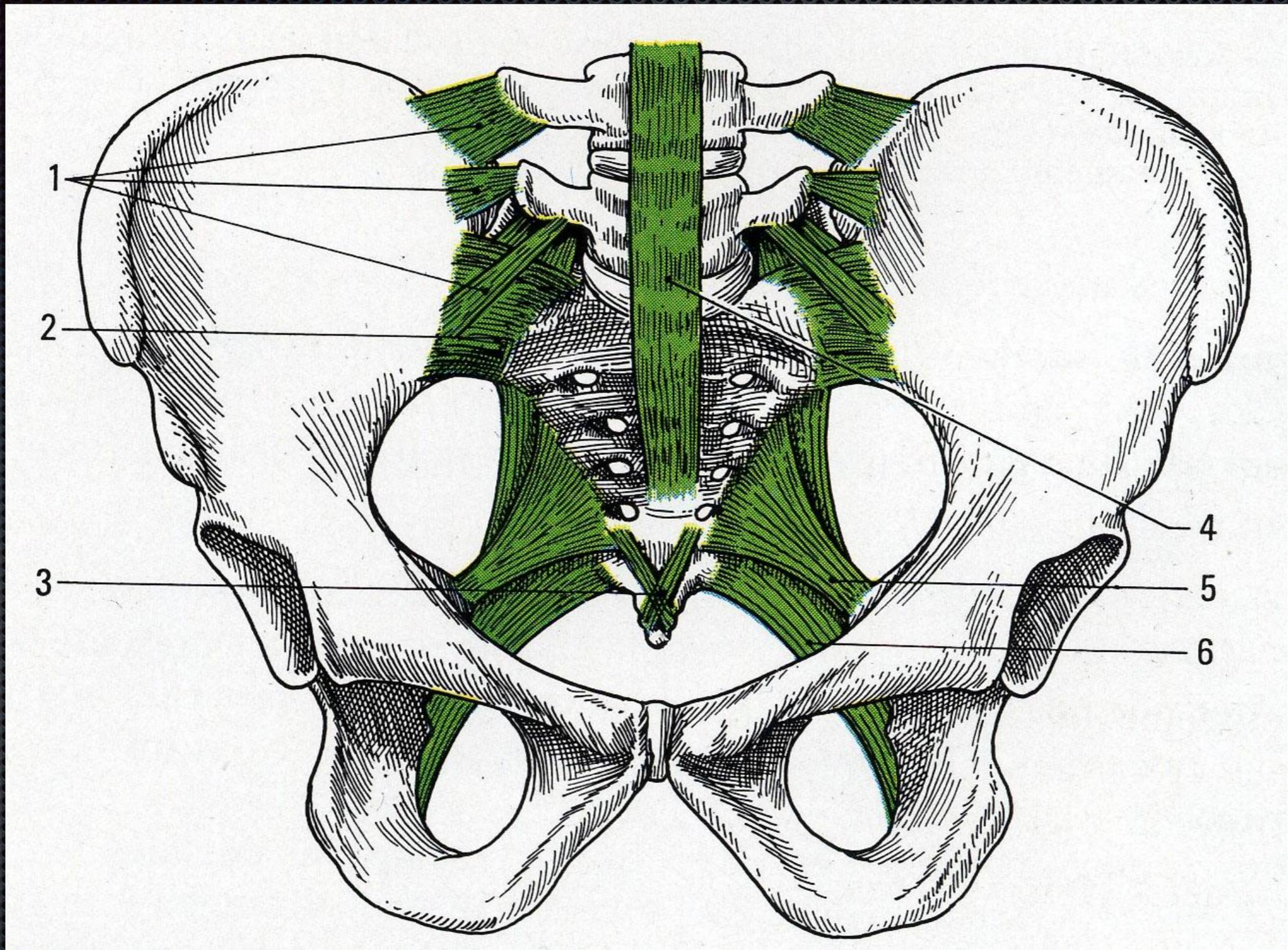
- Région du promontoire
- Paroi-pelvienne latérale
- Cloison recto-vaginale
- Dissection antérieure

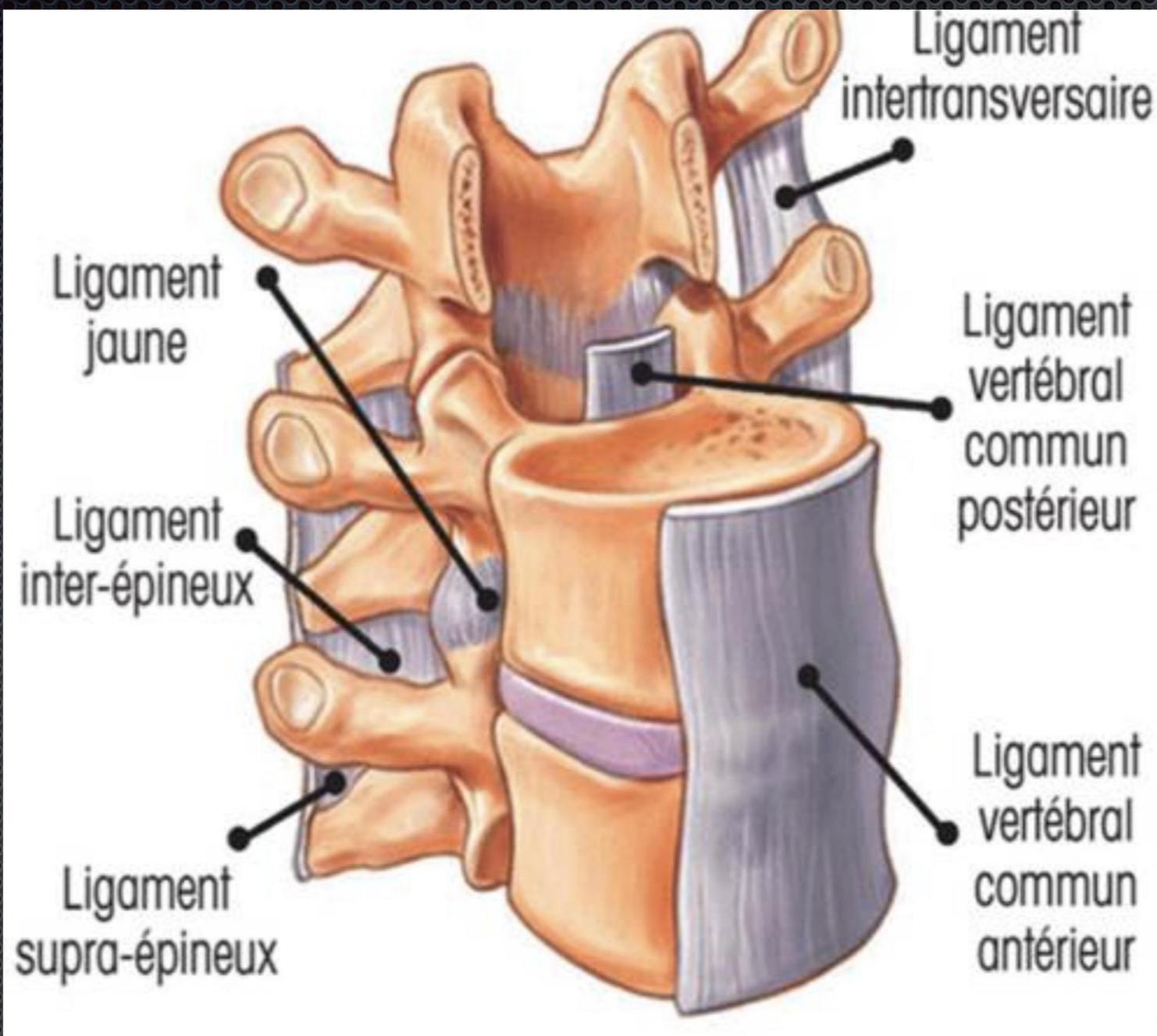
Le promontoire

- promonto-fixation en français
- sacro-colpopexy en anglais

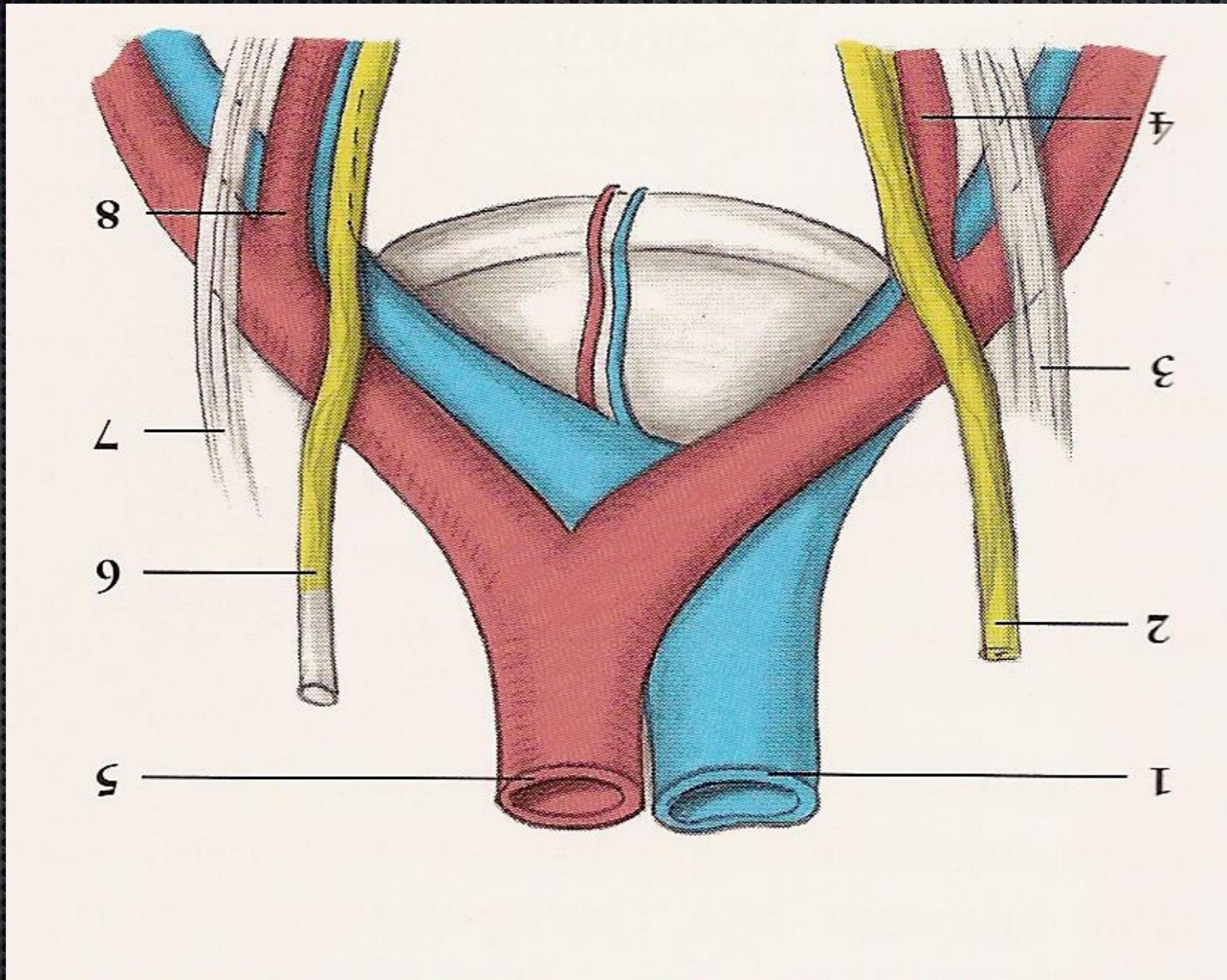


- en fait fixation au ligament vertébral commun antérieur
- au niveau de L5-S1
- Repères anatomiques
 - Le ligament vertébral commun antérieur
 - Les gros vaisseaux
 - La veine sacrée moyenne

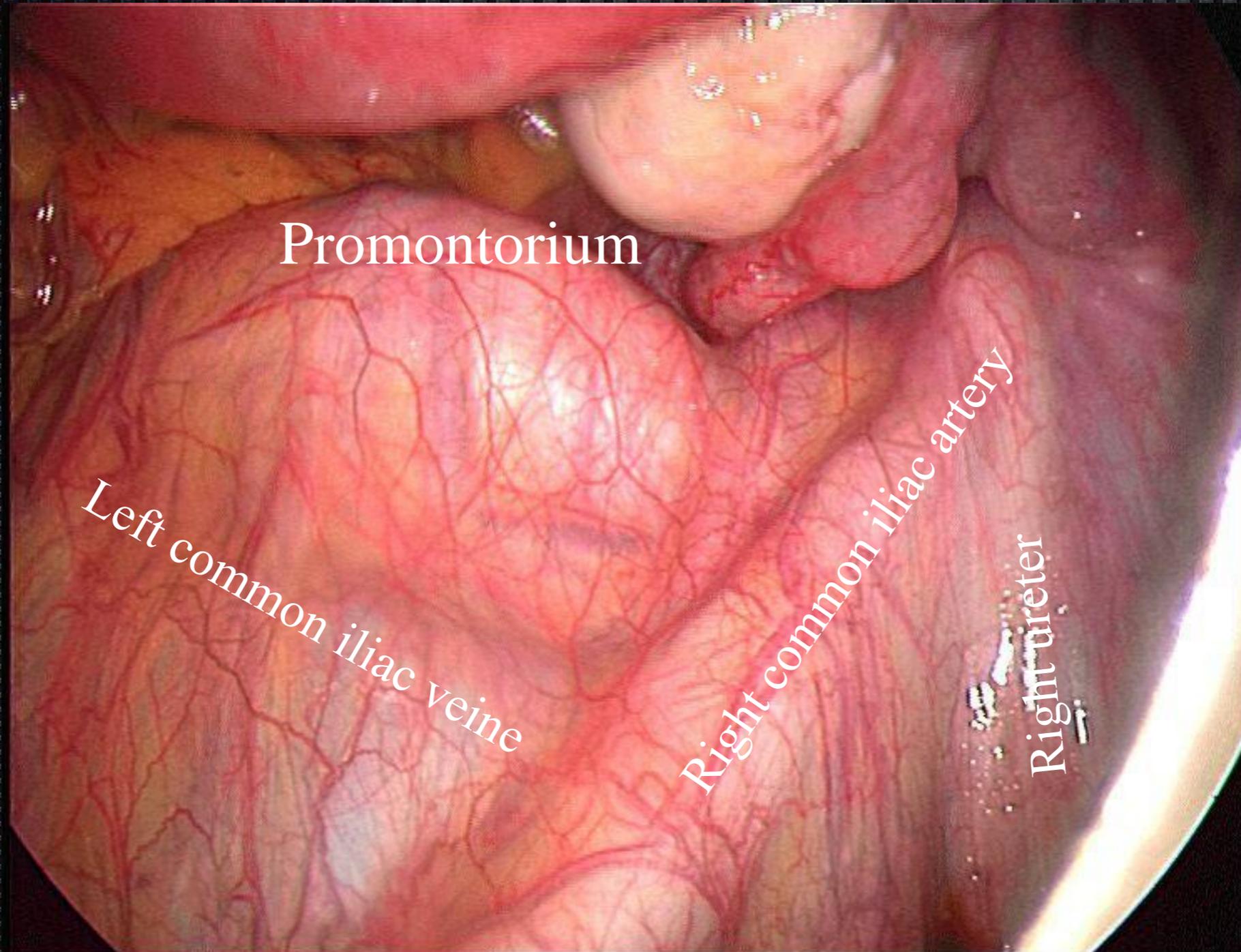




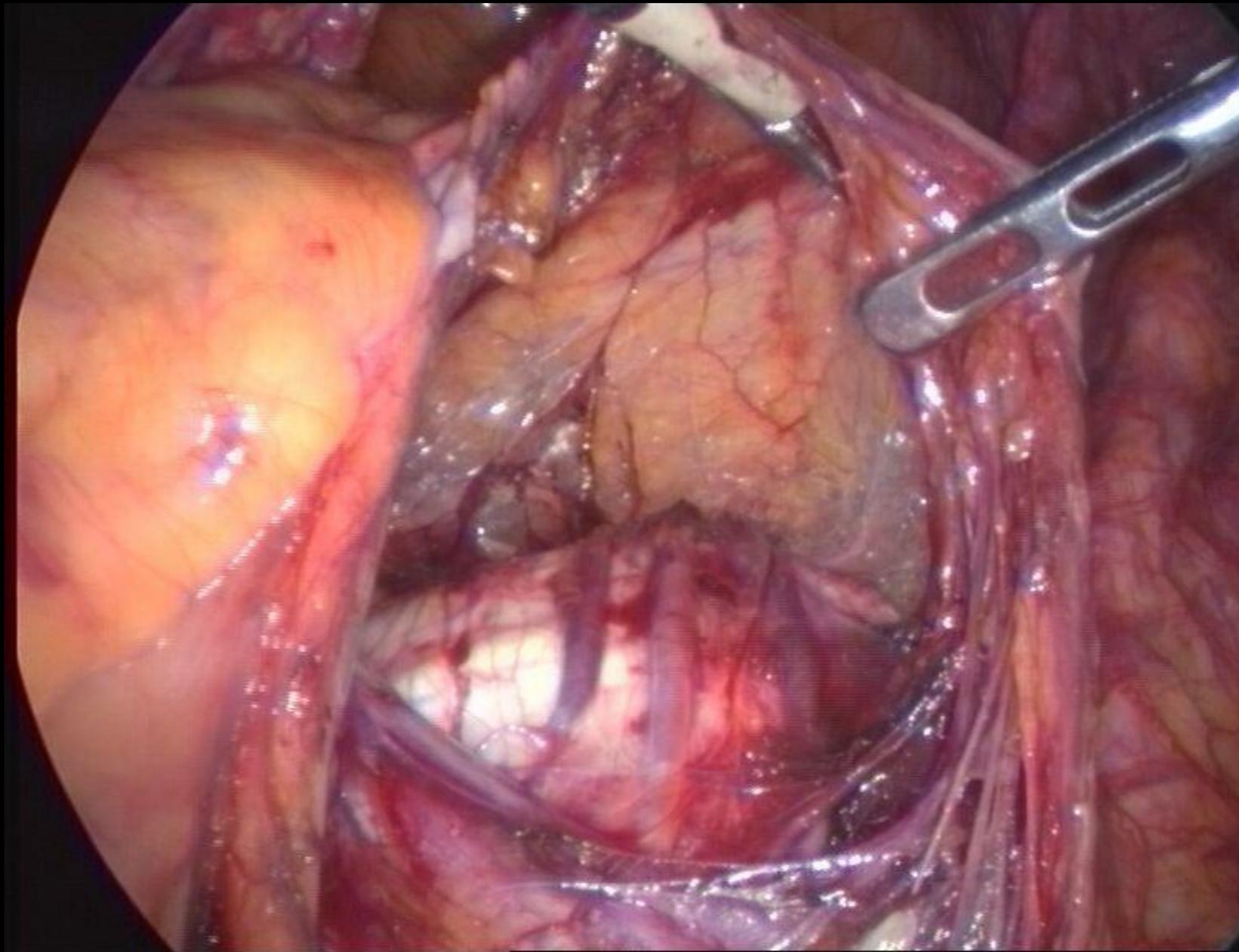
Anatomie du promontoire



Anatomie du promontoire

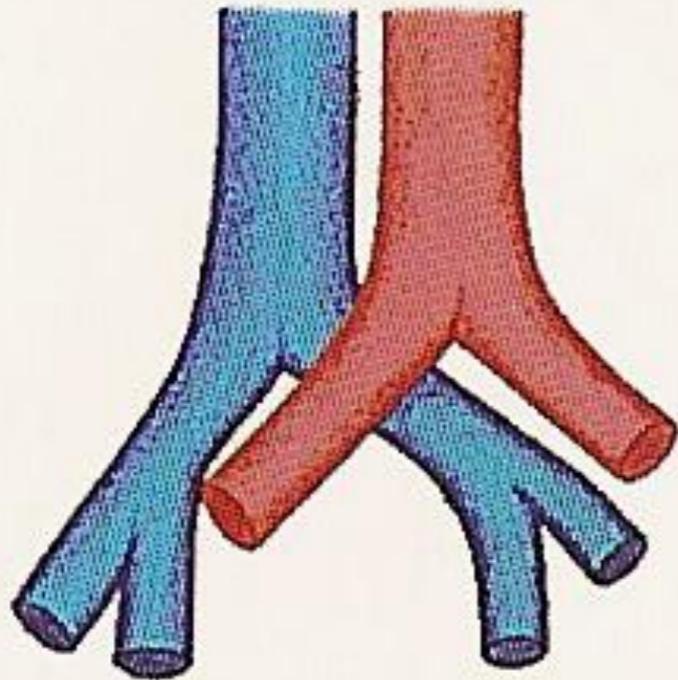


Anatomie du promontoire

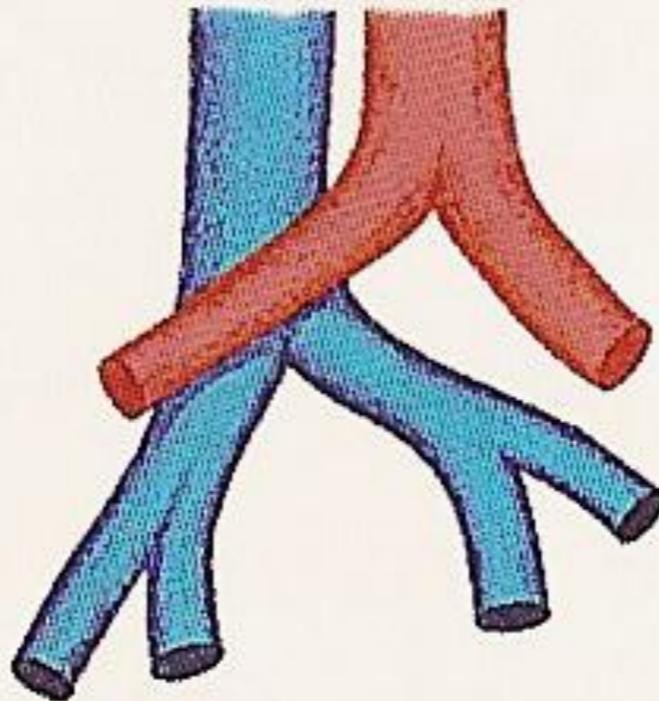




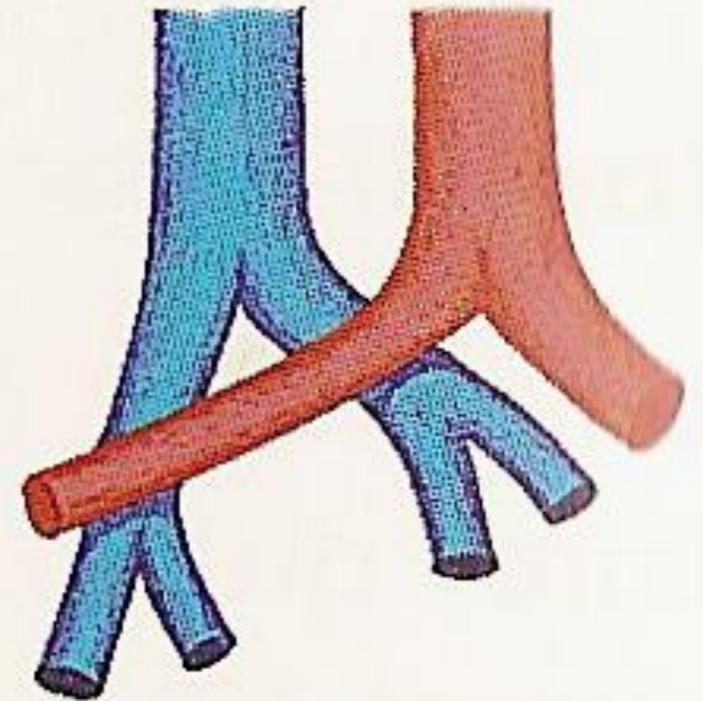
Anatomie du promontoire



Type habituel



Type haut



Type bas

Ne pas se perdre dans l'espace pré-sacré

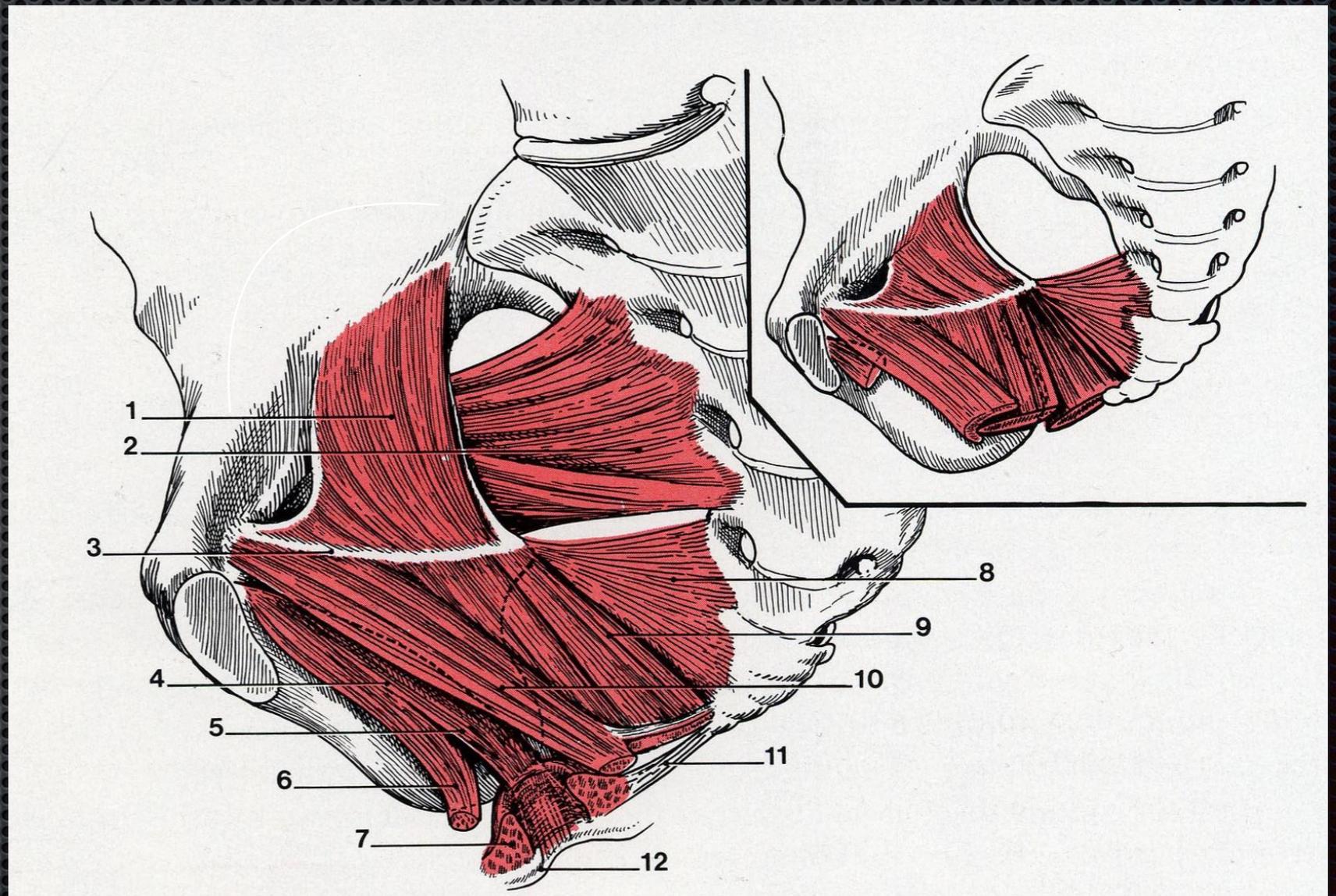
- vasculaire, dangereux...

Paroi pelvienne latérale

- But : ouvrir péritoine pelvien latéral pour sous péritonisation prothèse
- Repères anatomiques
 - éléments musculaires
 - fosse para-rectale
 - nerfs hypogastriques
 - branches veineuses hypogastriques
 - uretère

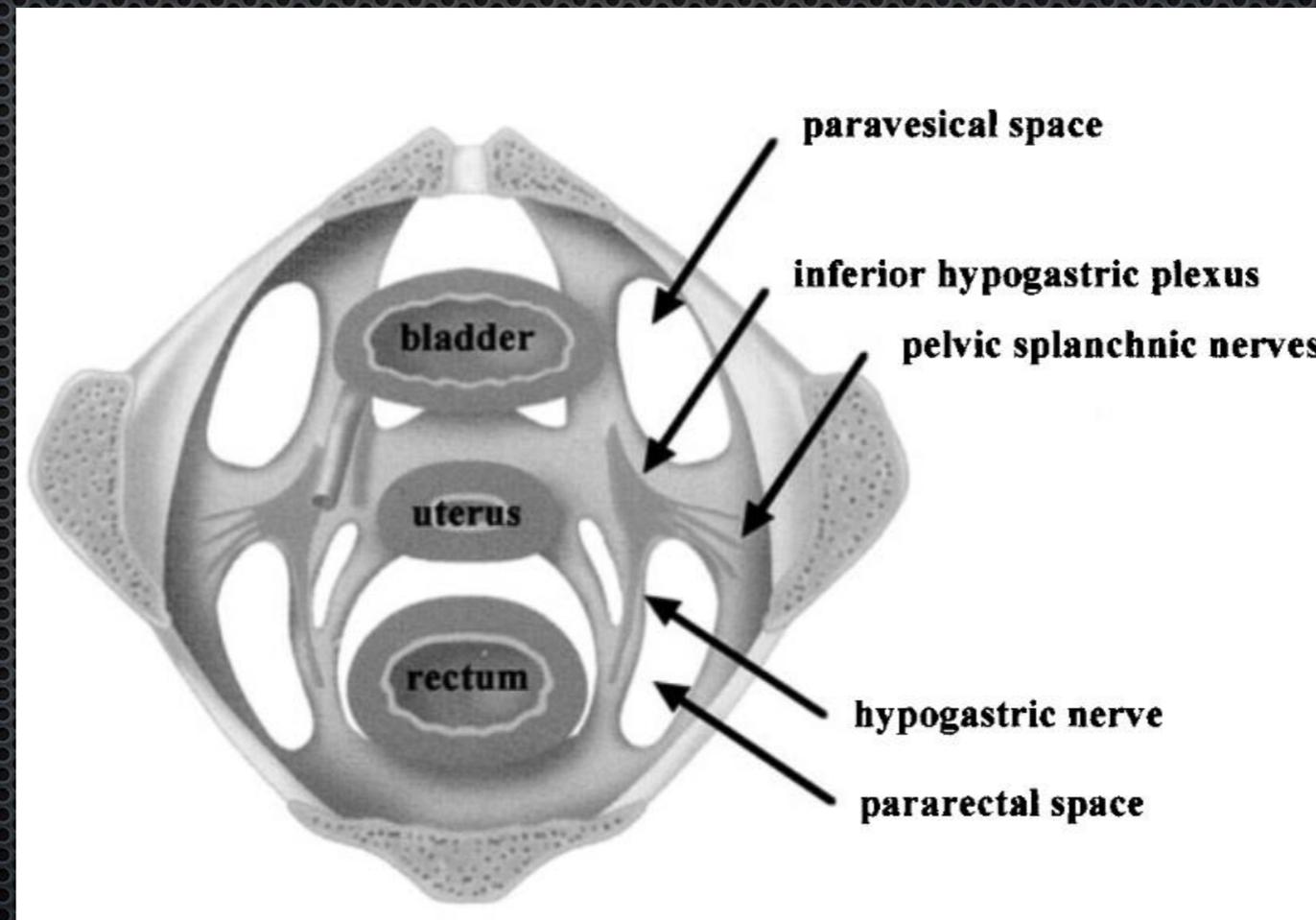
Muscles de la paroi pelvienne latérale

- Pyriforme
- Sacro-épineux
- (levator ani)



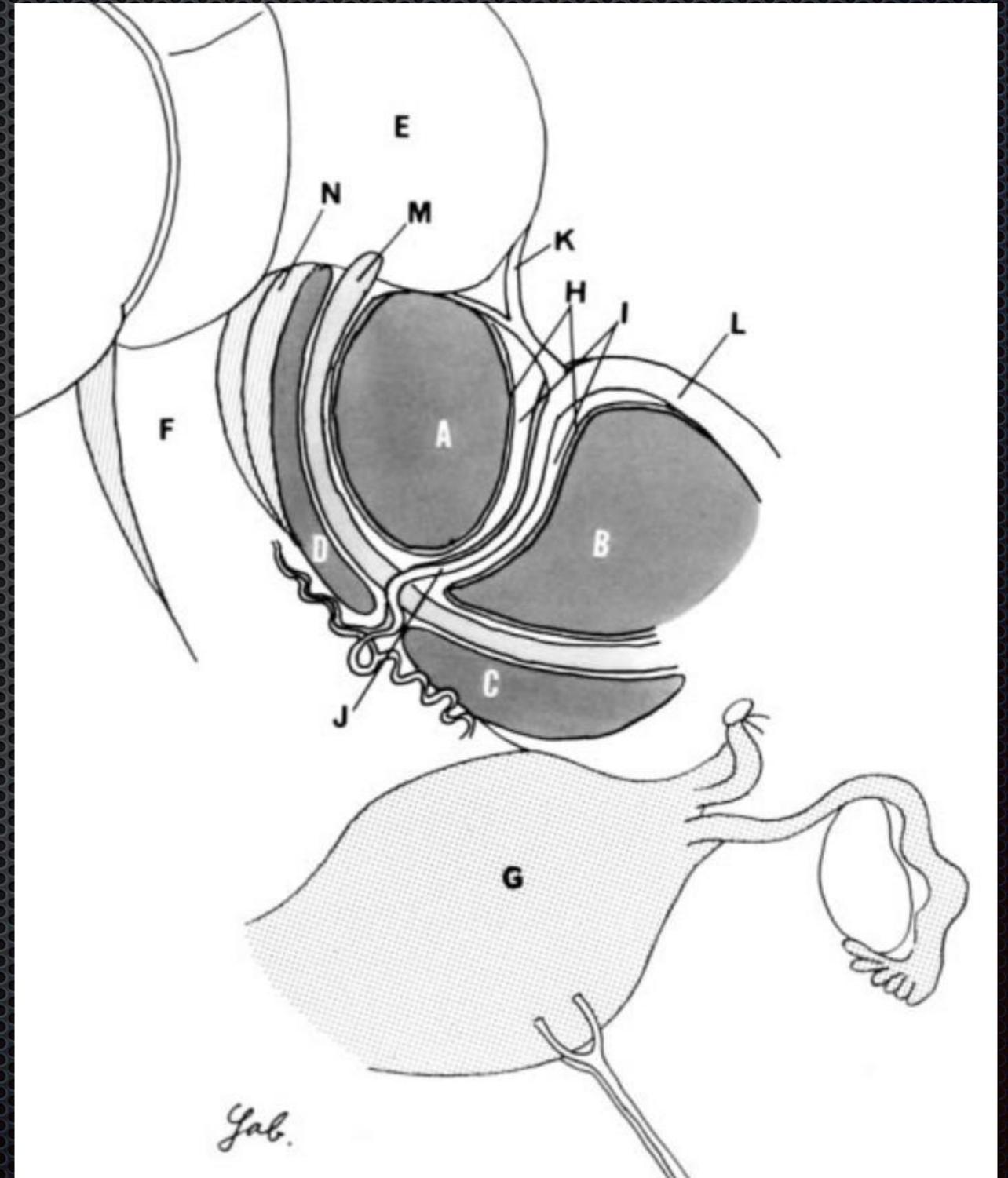
Espaces latéraux

- Fosse para-vésicale
- Fosse para-rectale



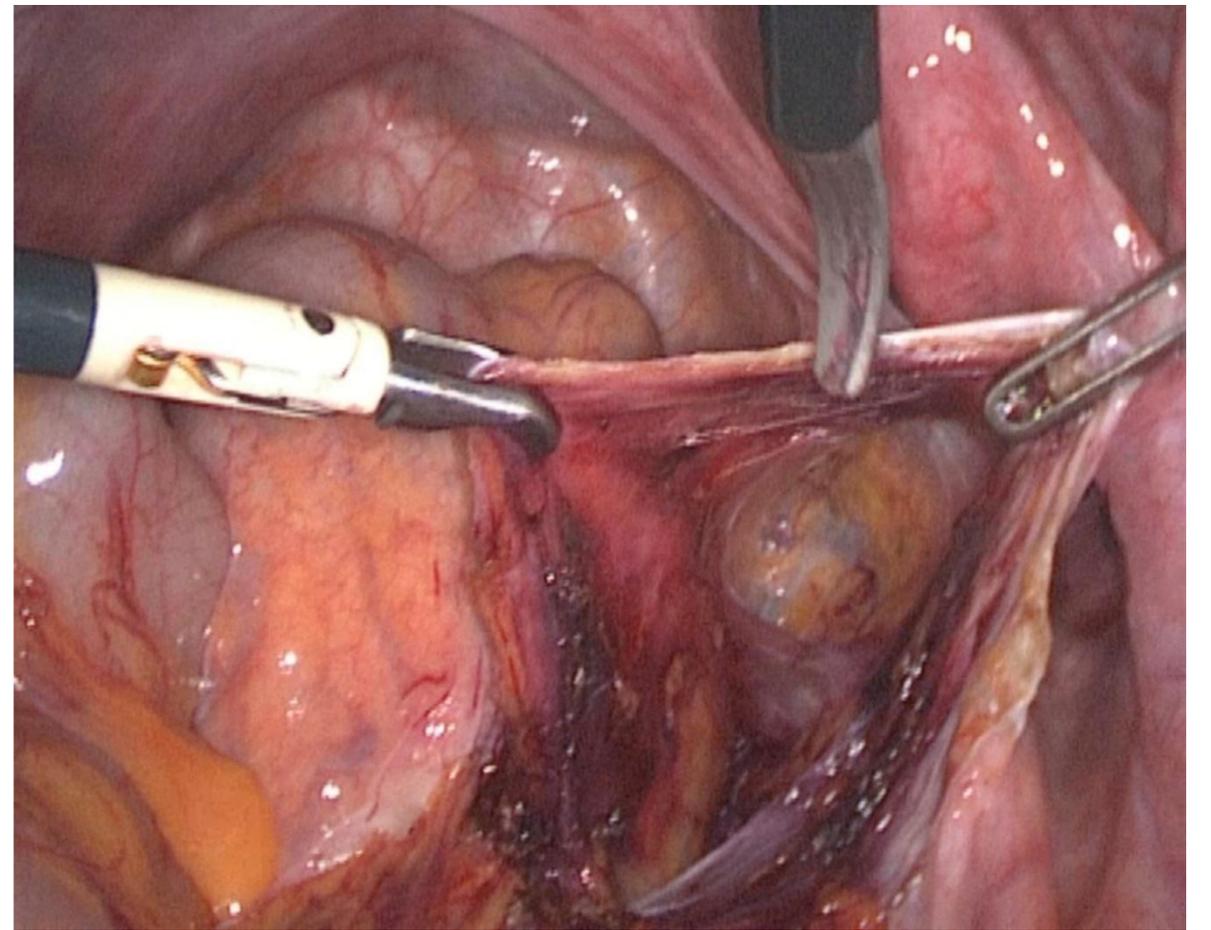
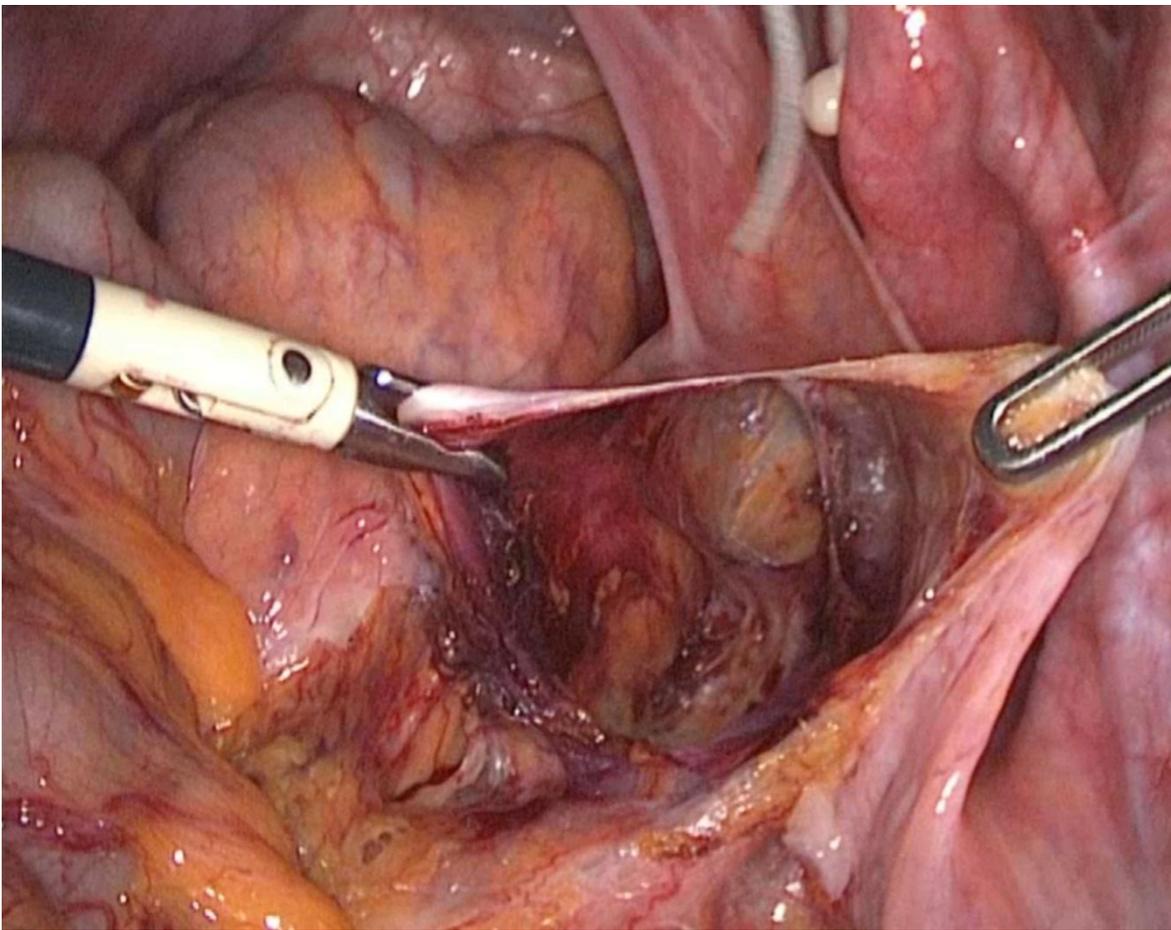
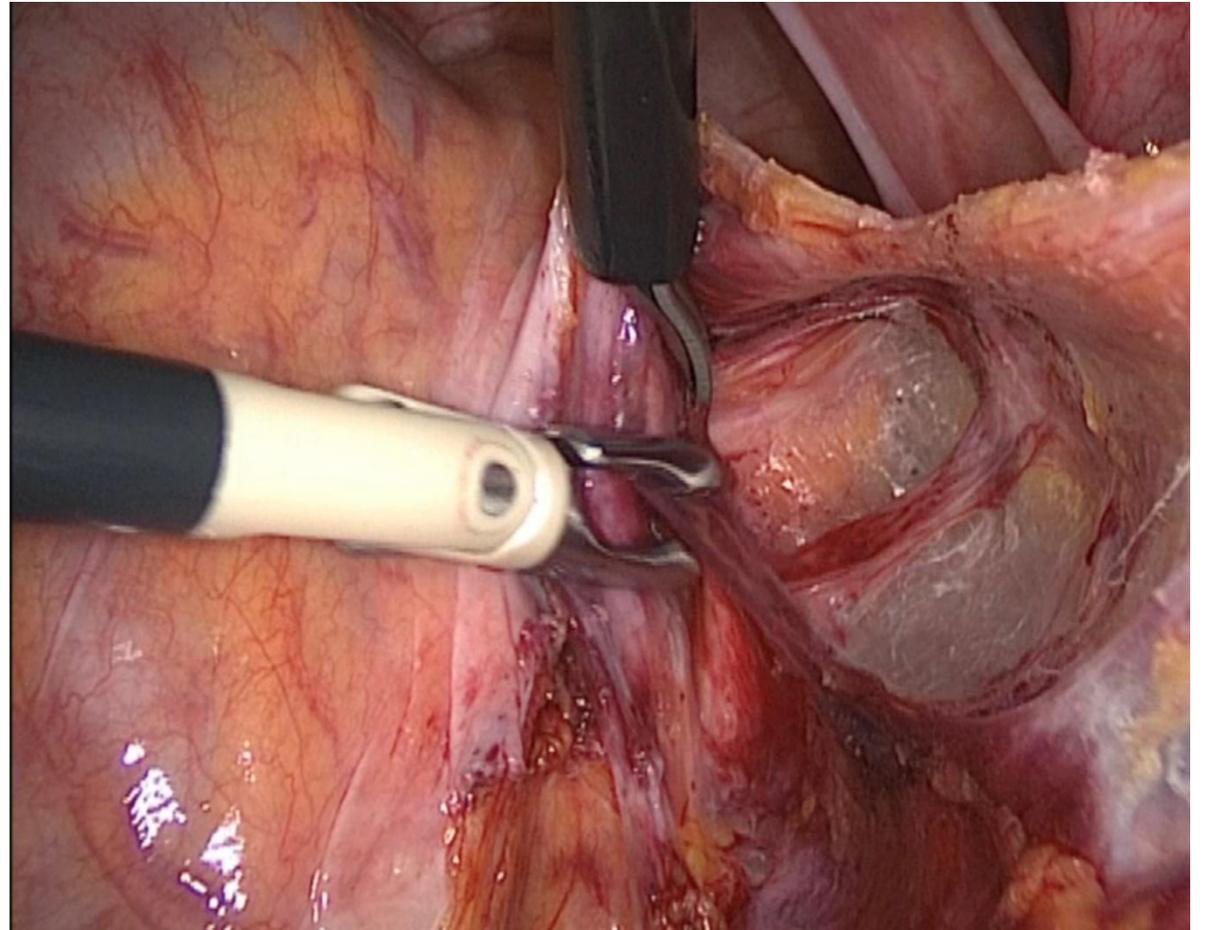
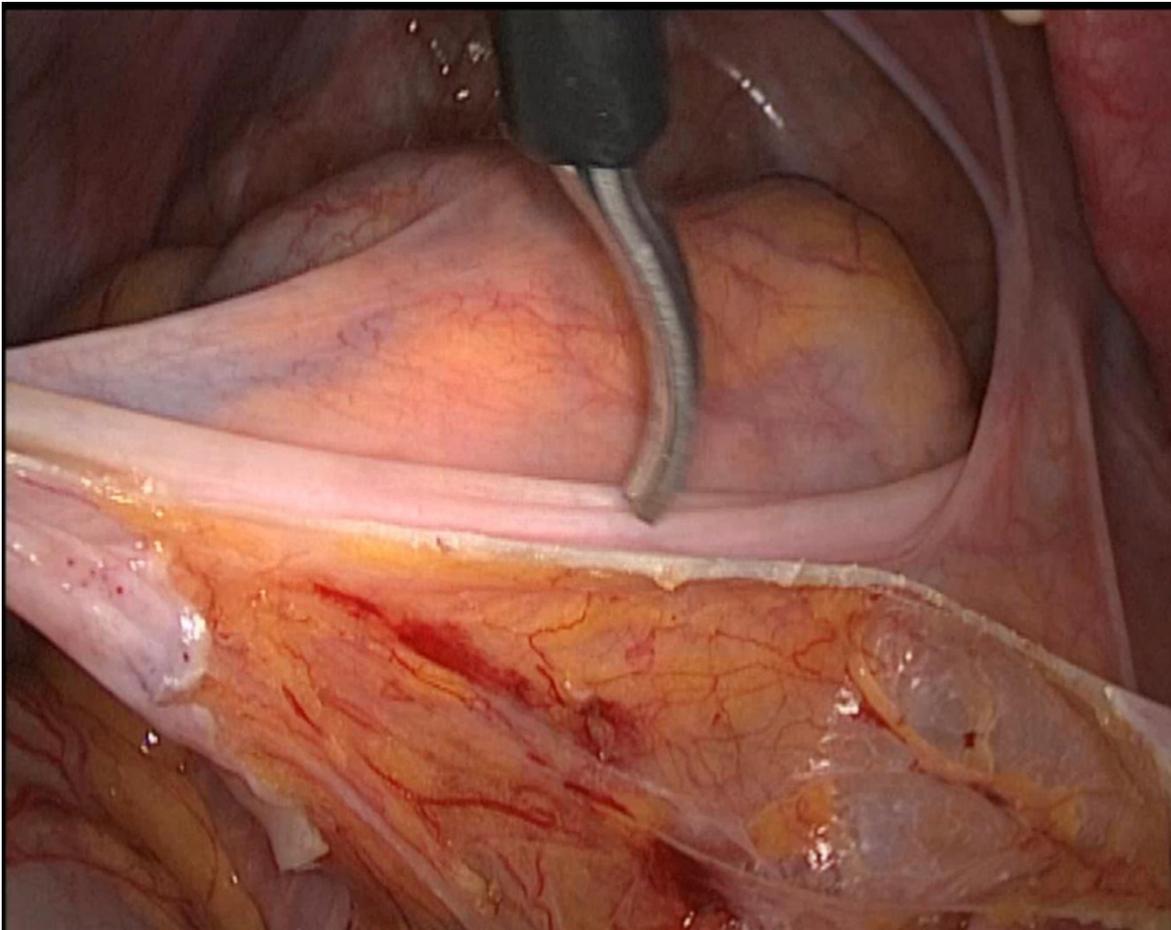
Espaces para-rectaux

- Espace de Lasko (B)
- Espace d'Okabayashi (C)
- Espace de Yabuki
ou 4e espace (D)

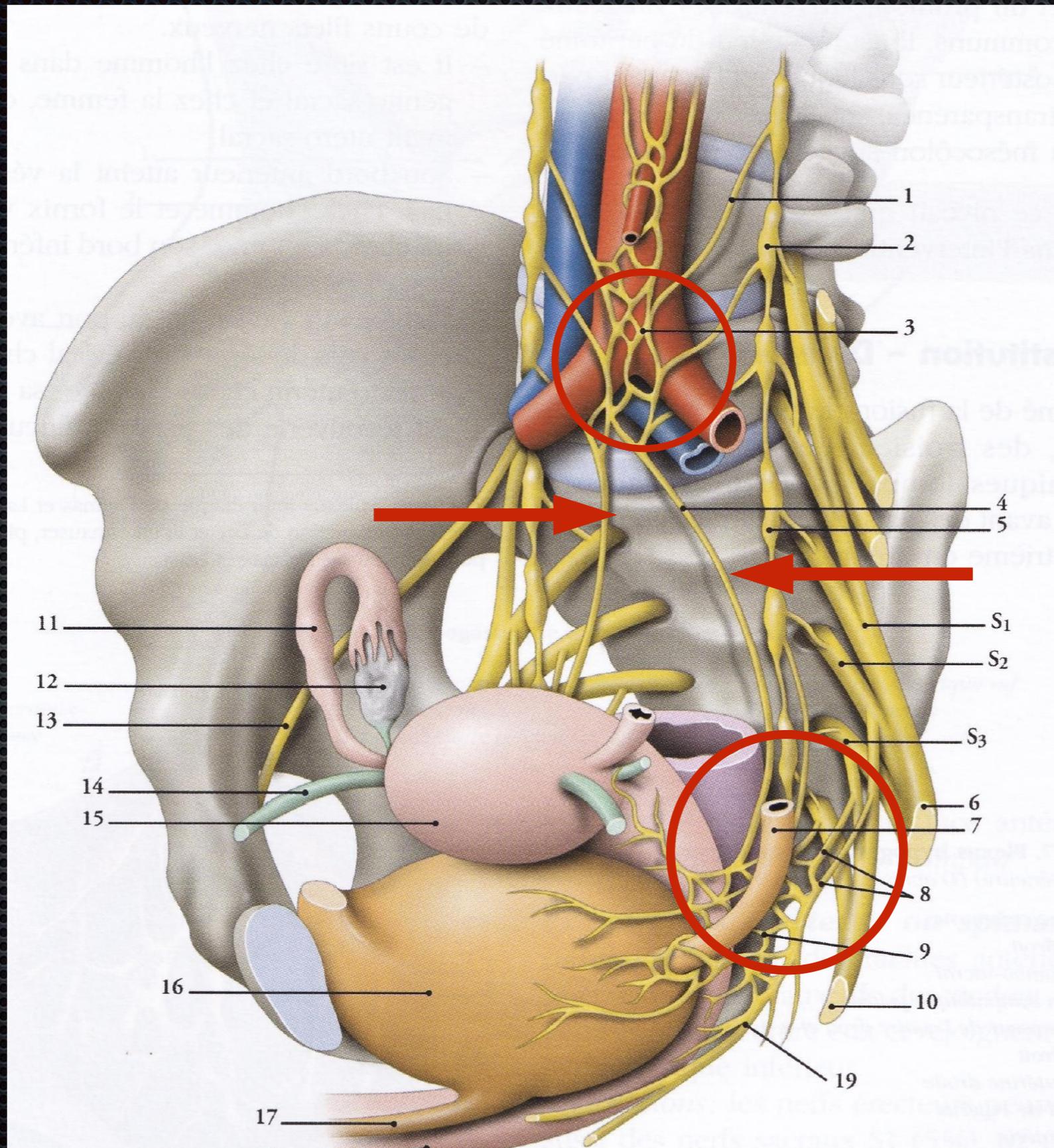


Dans la promonto-fixation

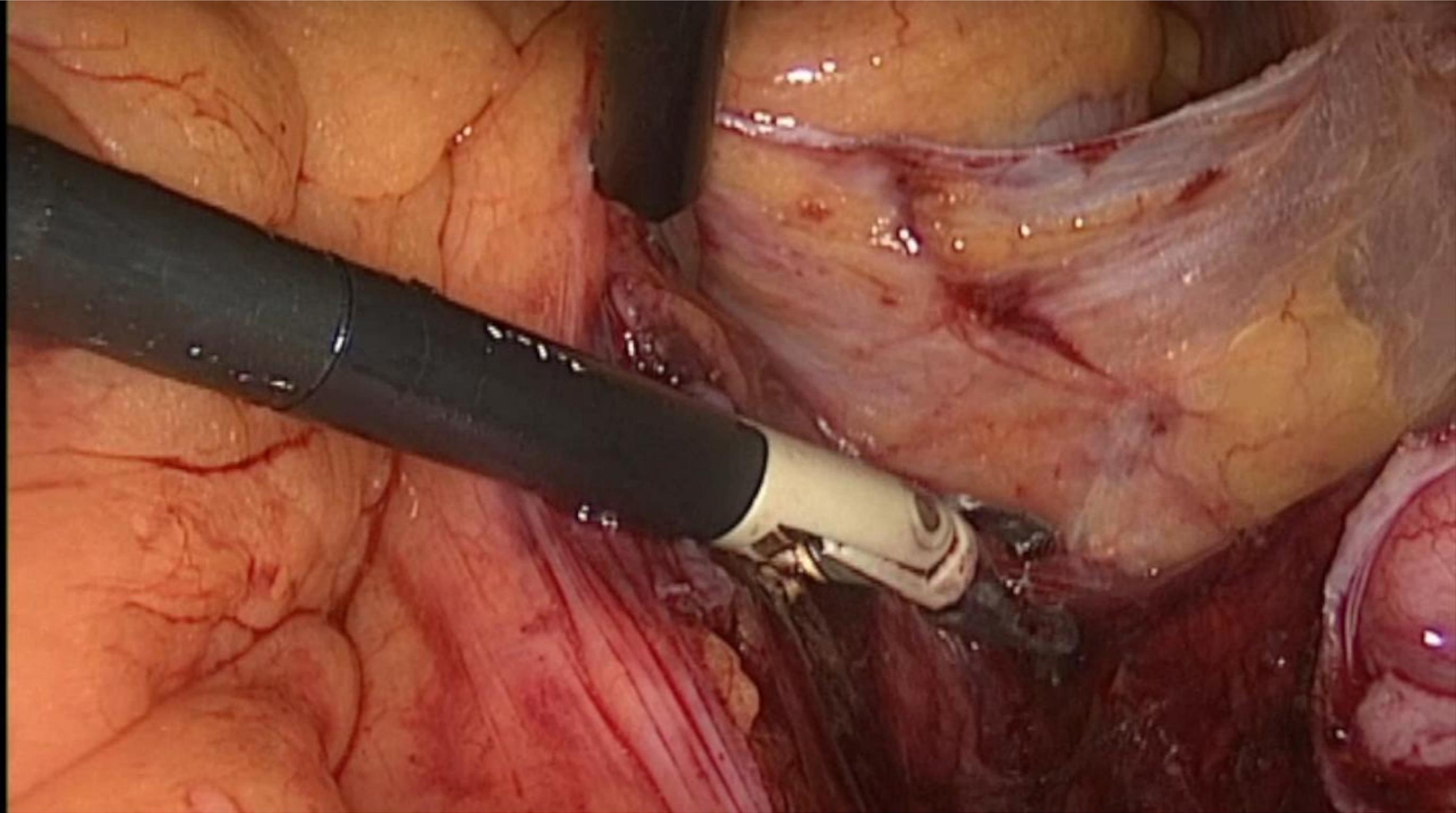
- ouverture et dissection en dedans
 - de l'uretère
 - du nerf hypogastrique
- ouverture de l'espace d'Okabayashi



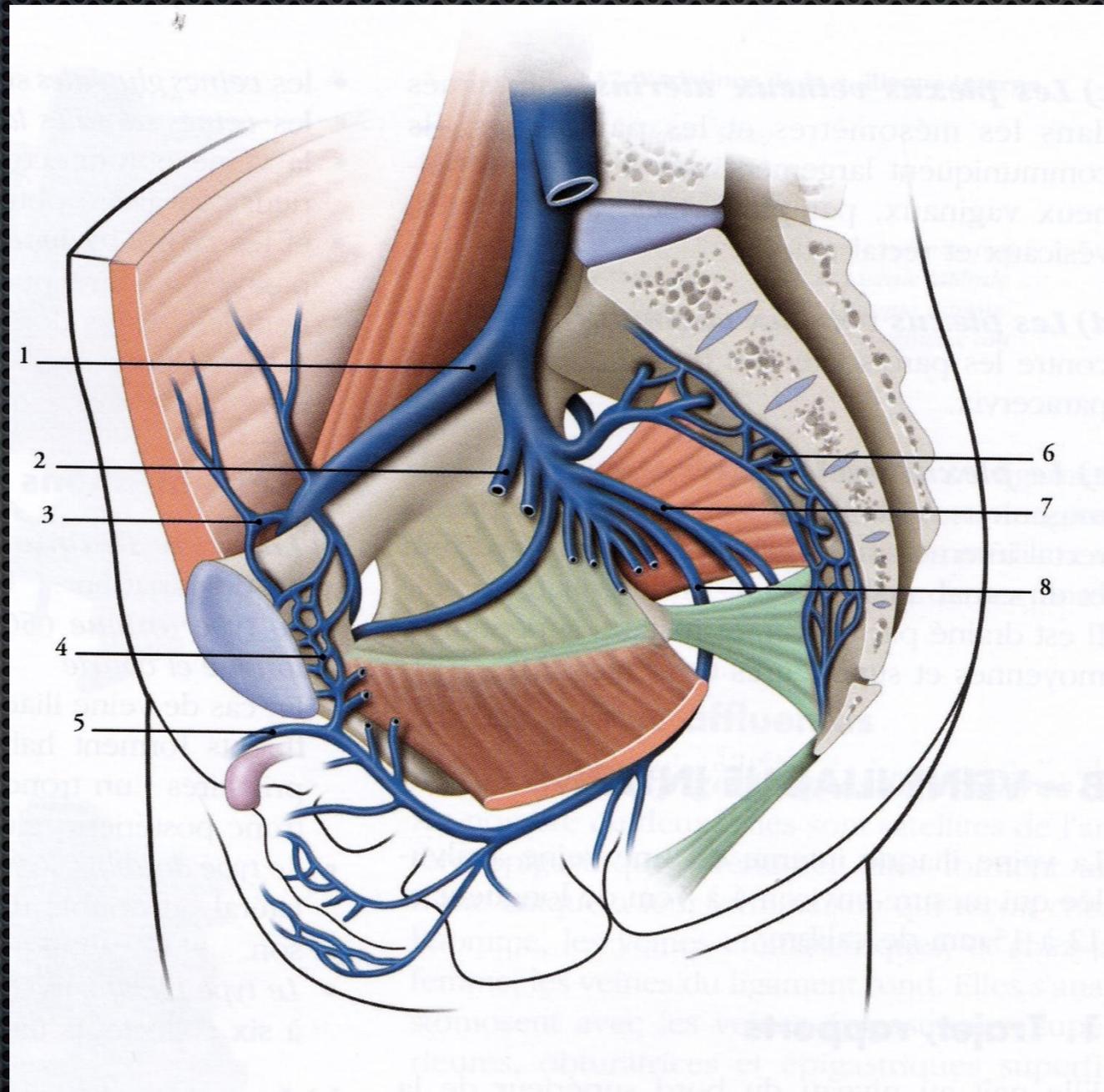
Nerfs hypogastriques



Kamina

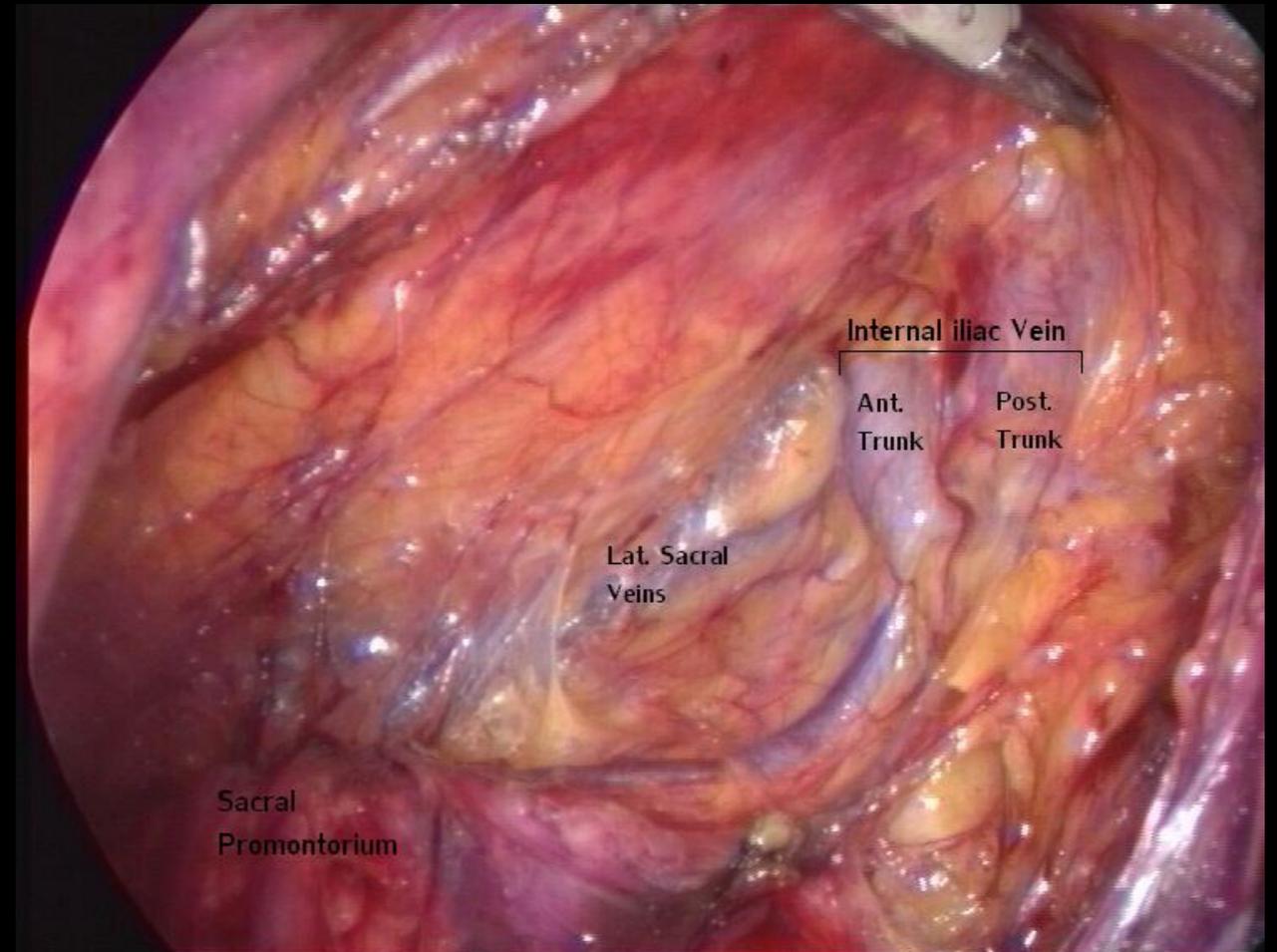


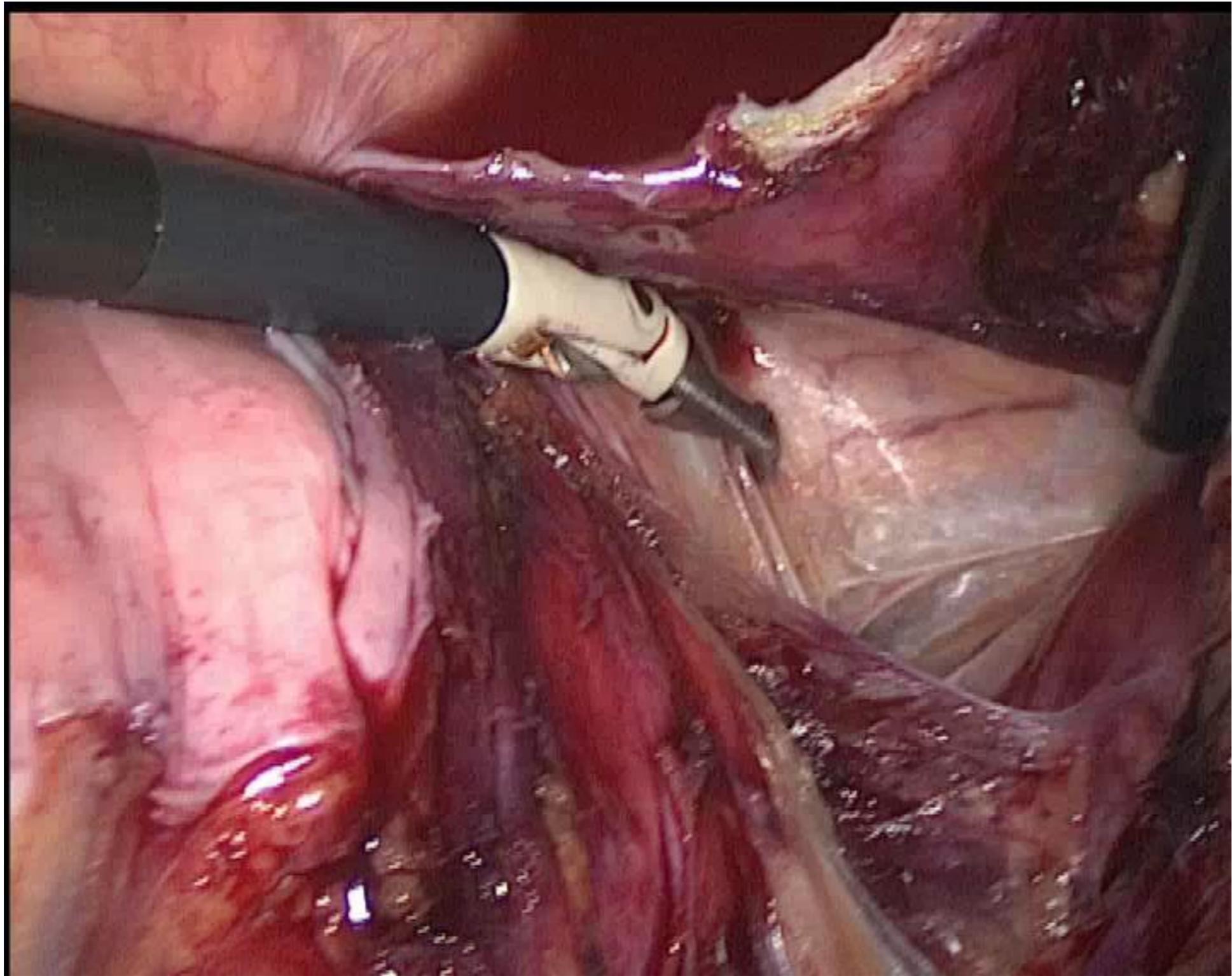
Branches veineuses hypogastriques



Incision du péritoine latéral droit

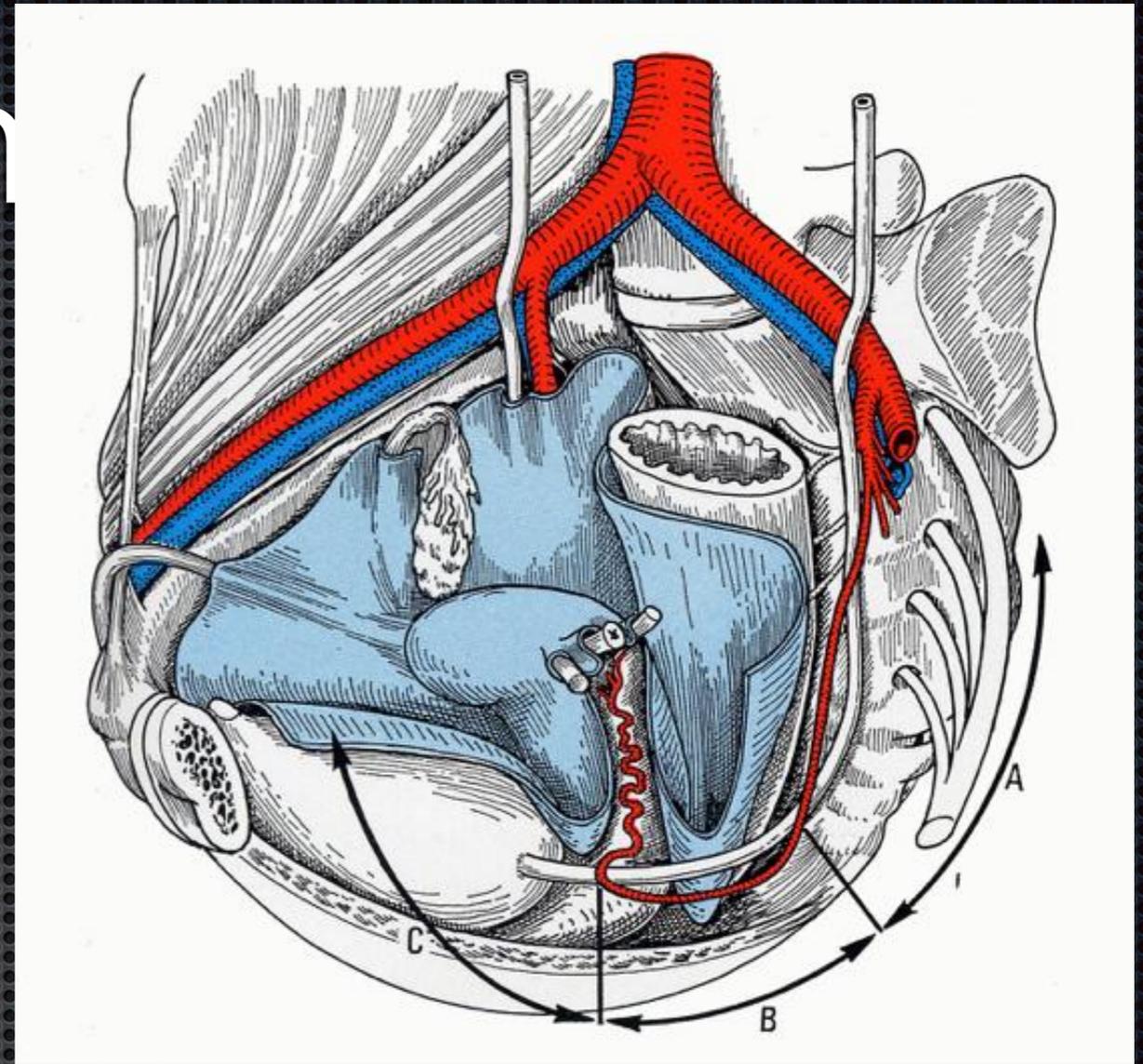
- Attention
 - aux gros vaisseaux pelviens
 - en particulier veine iliaque interne et ses branches (Tiger area)





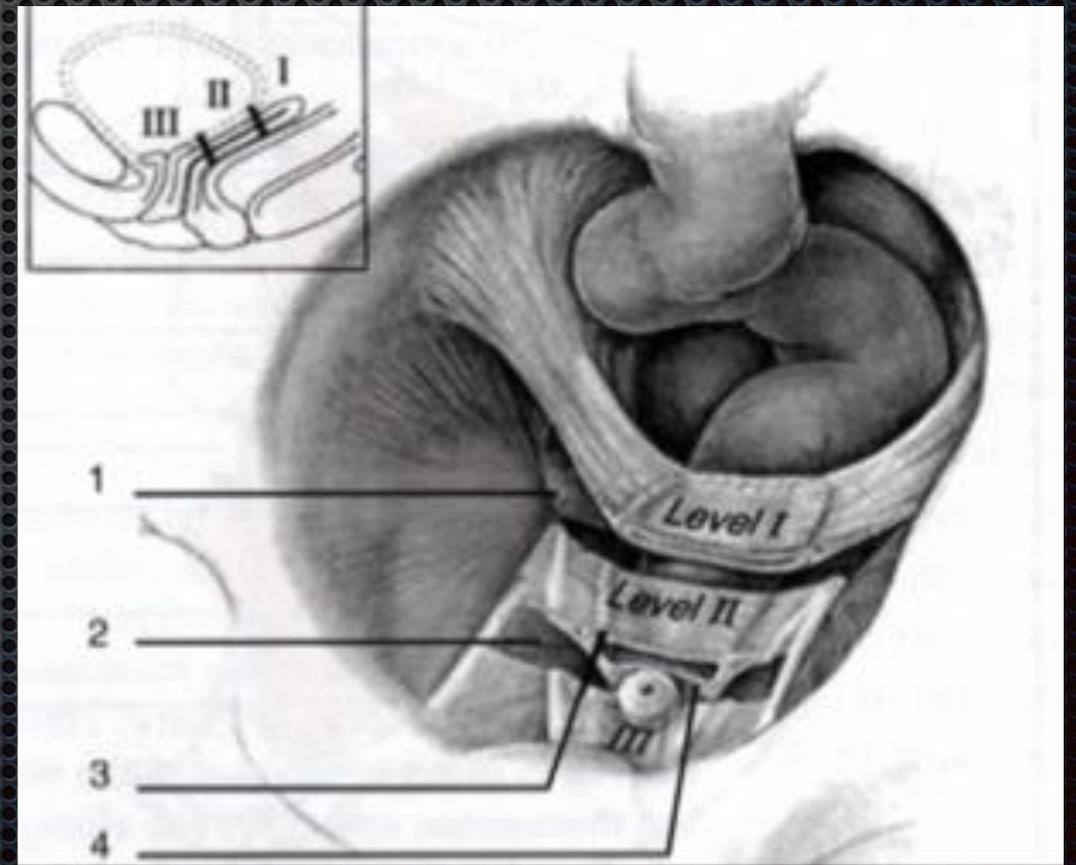
L'uretère pelvien

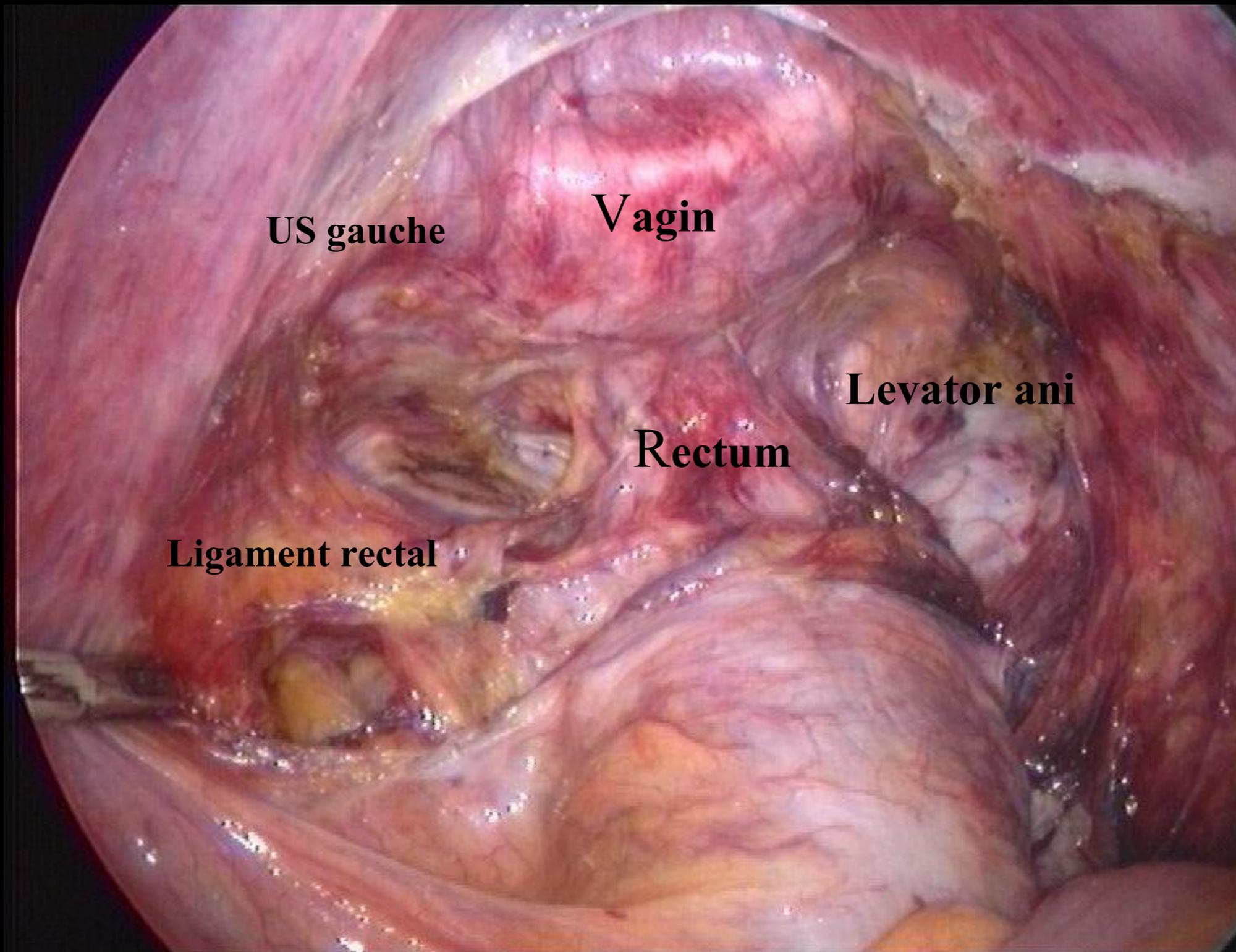
- portion pré-ligamentaire
- le repérer
- puis le laisser au dessus et en dehors de la dissection
- Attention lors de la repéritonisation



La cloison recto-vaginale

- Les buts de la dissection
 - séparer rectum du vagin
 - disséquer muscle pubo-rectal
- Les repères anatomiques
 - la cloison recto-vaginale
 - Muscles pubo-rectaux
 - Artère rectale moyenne





US gauche

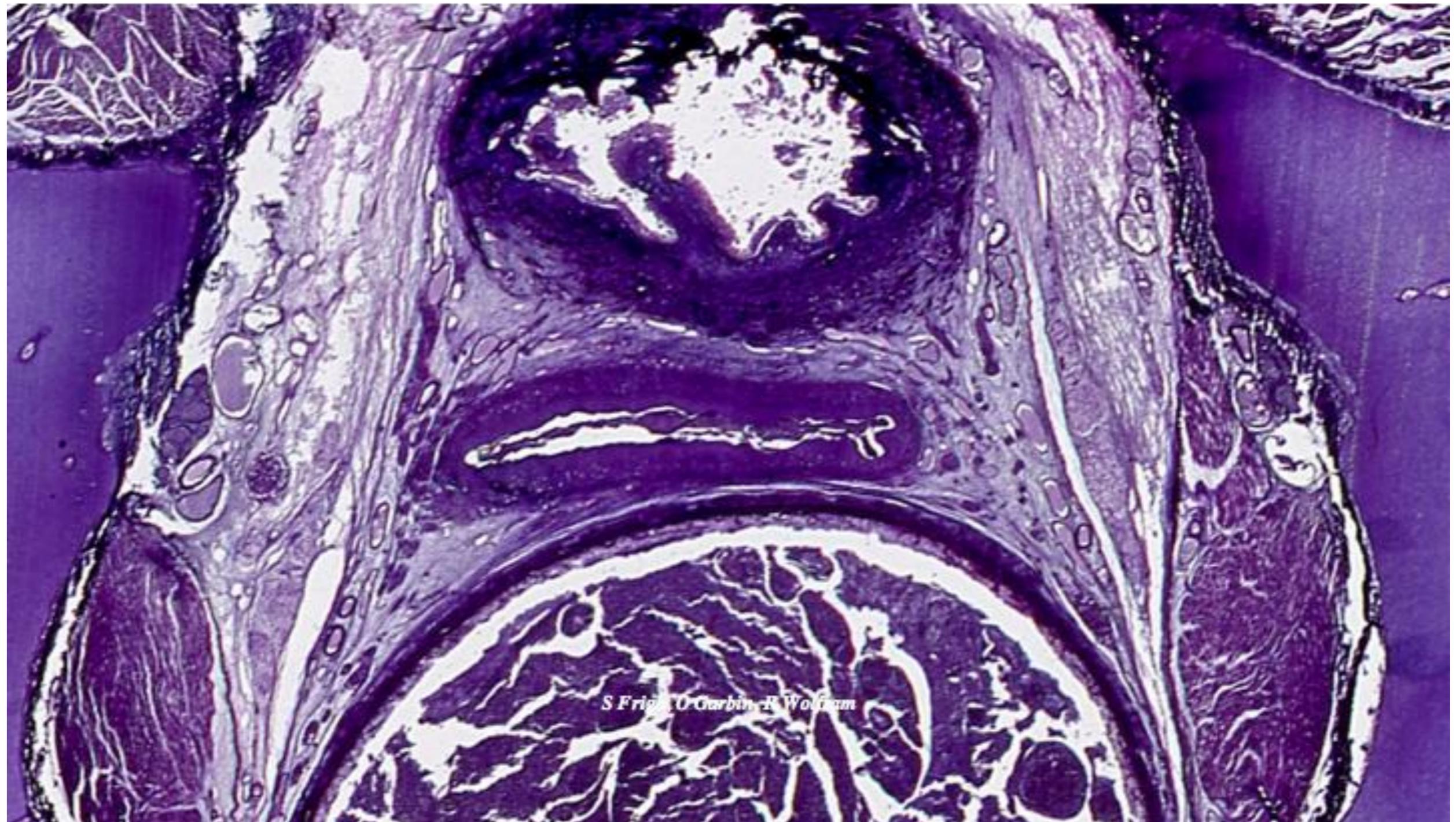
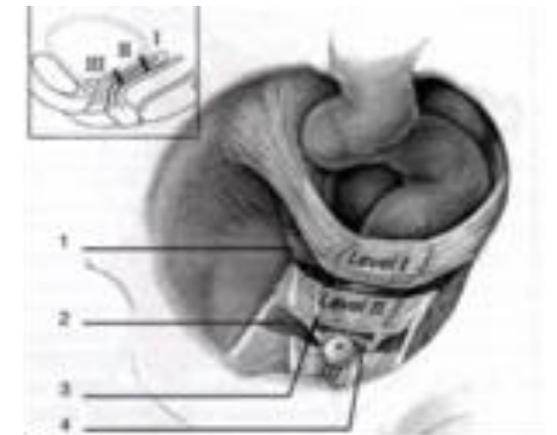
Vagin

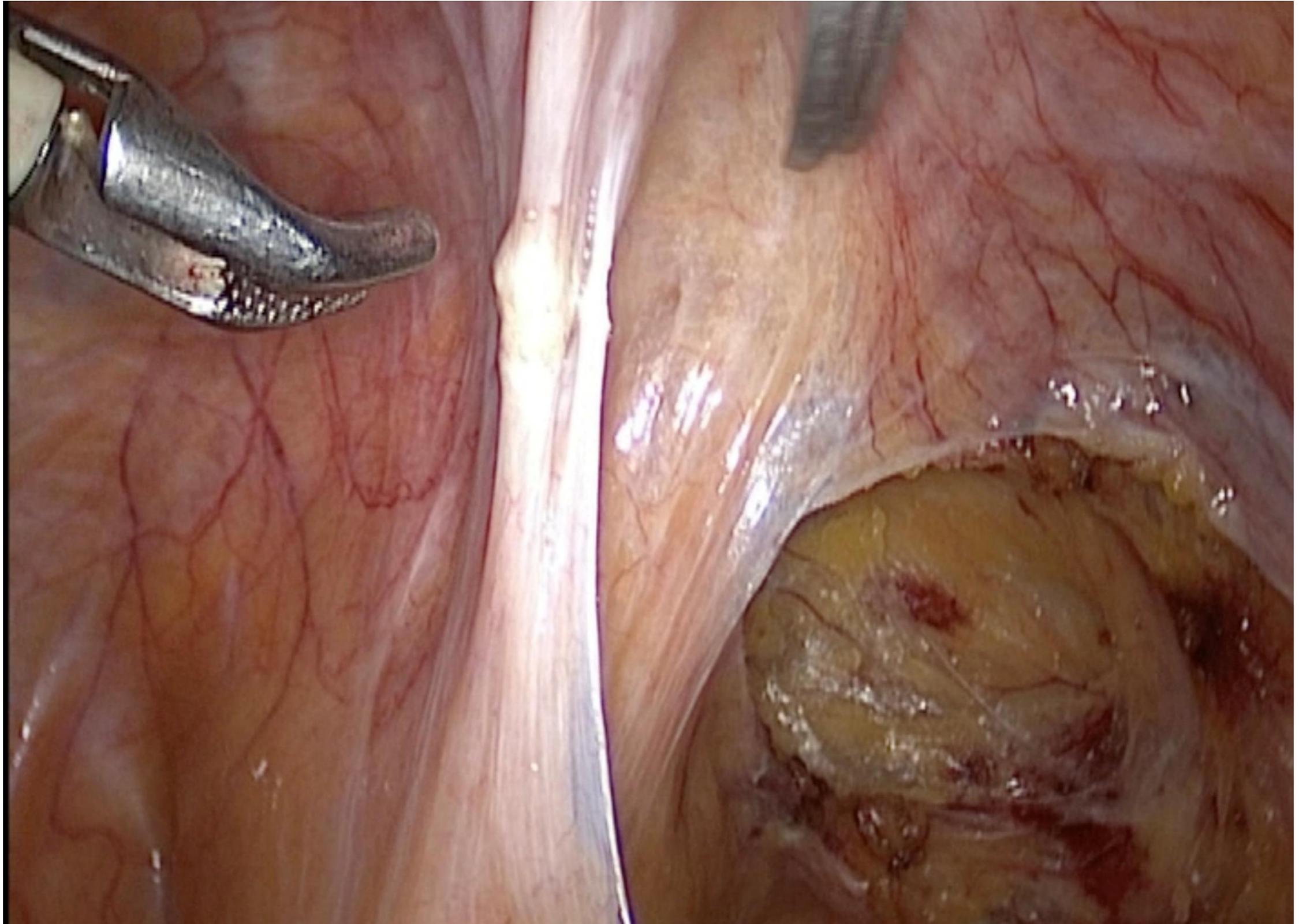
Levator ani

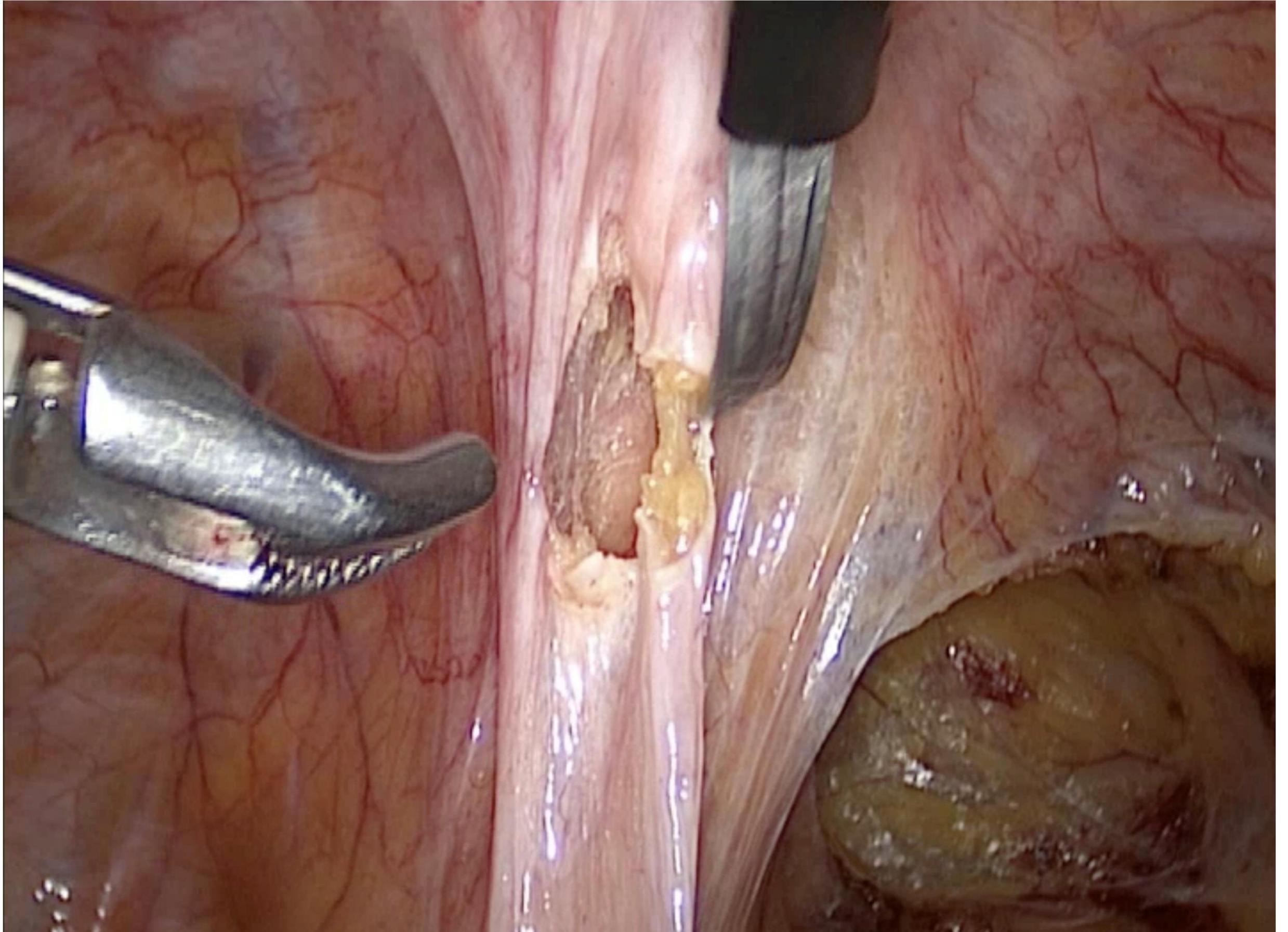
Rectum

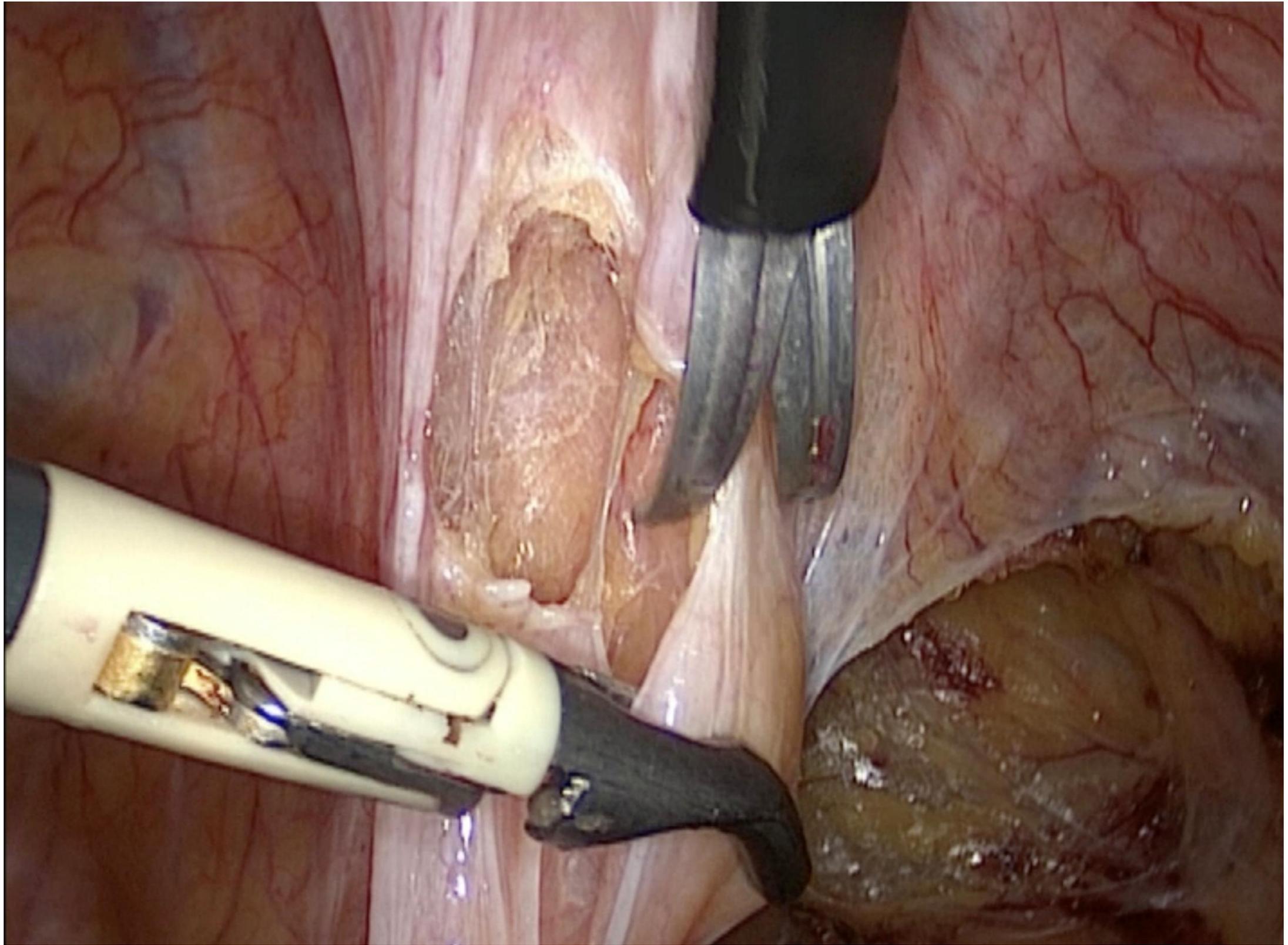
Ligament rectal

Le fascia recto-vaginal Niveau I

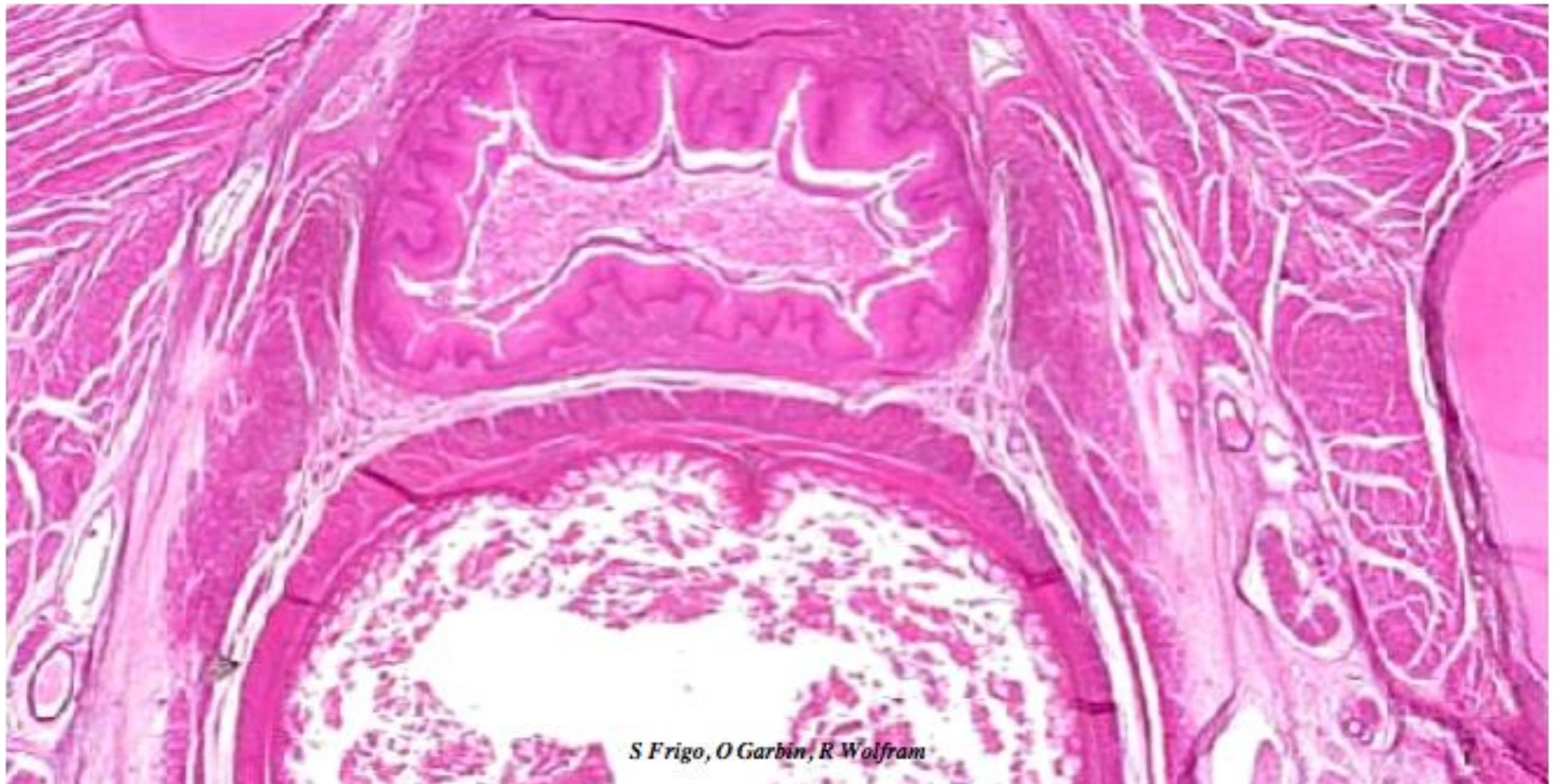
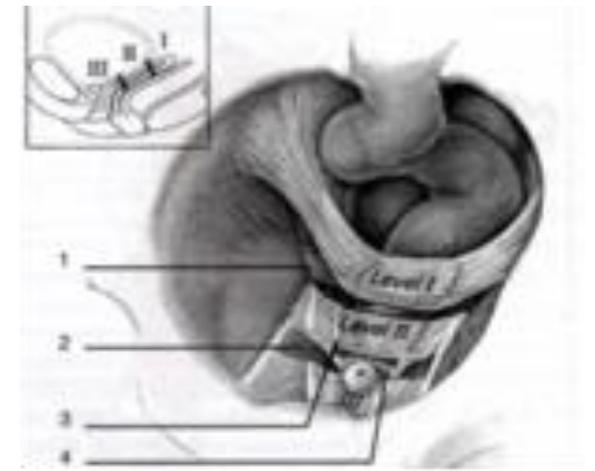






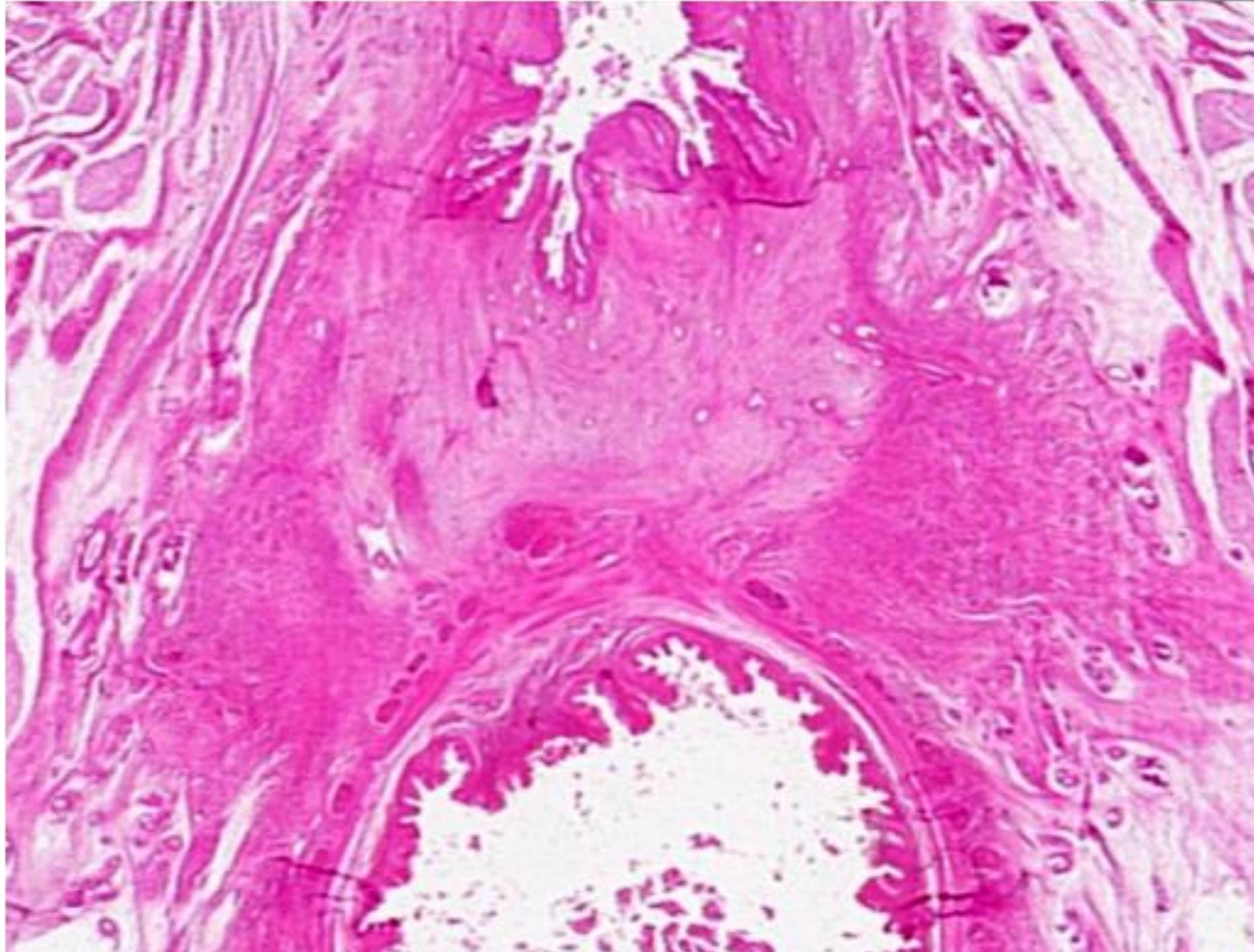
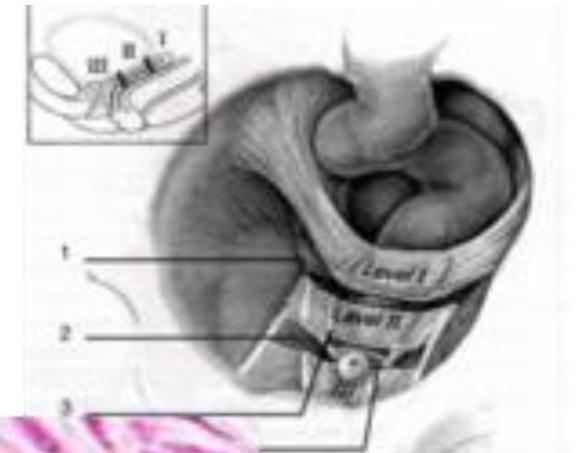


Le fascia recto-vaginal Niveau II

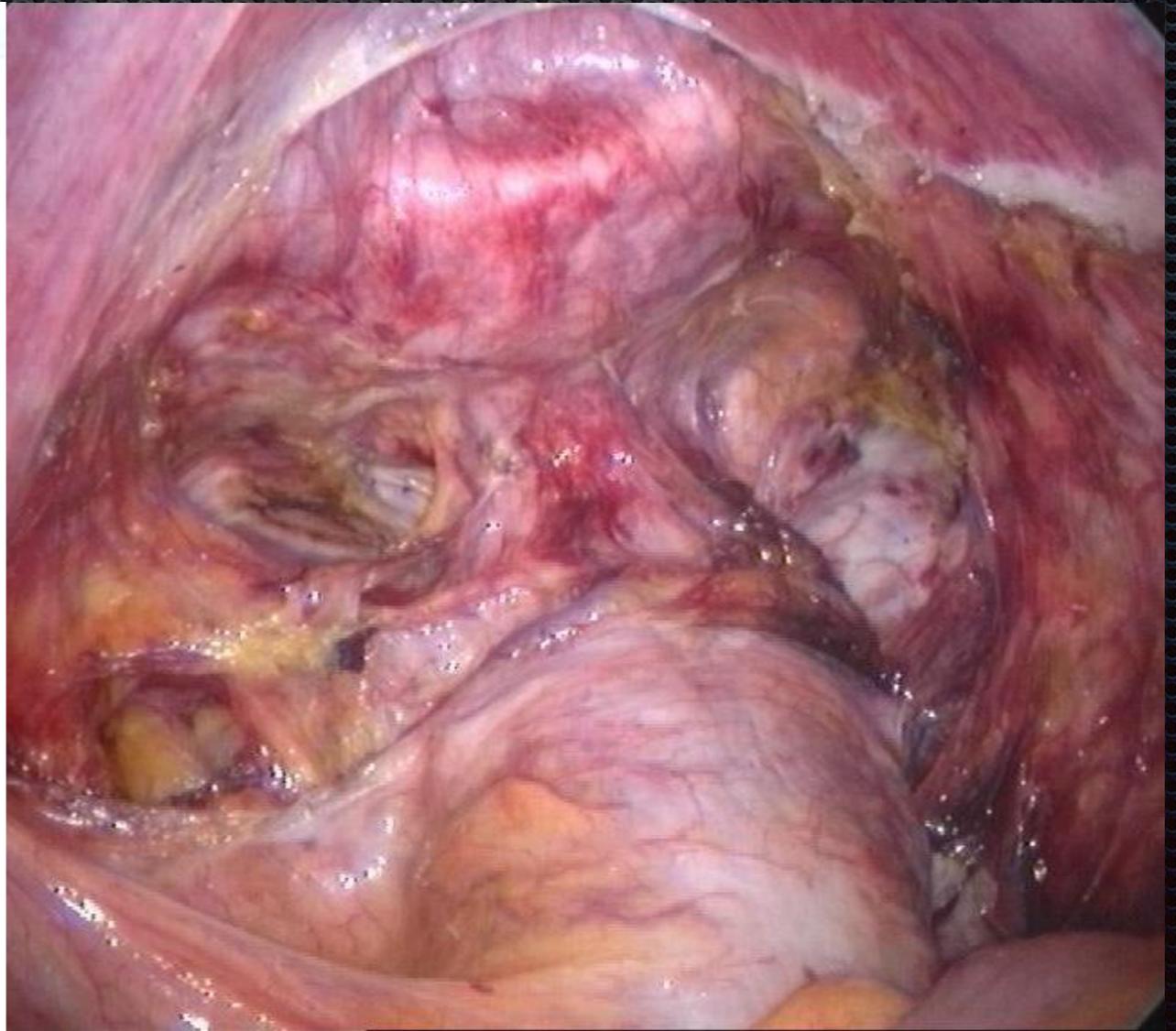
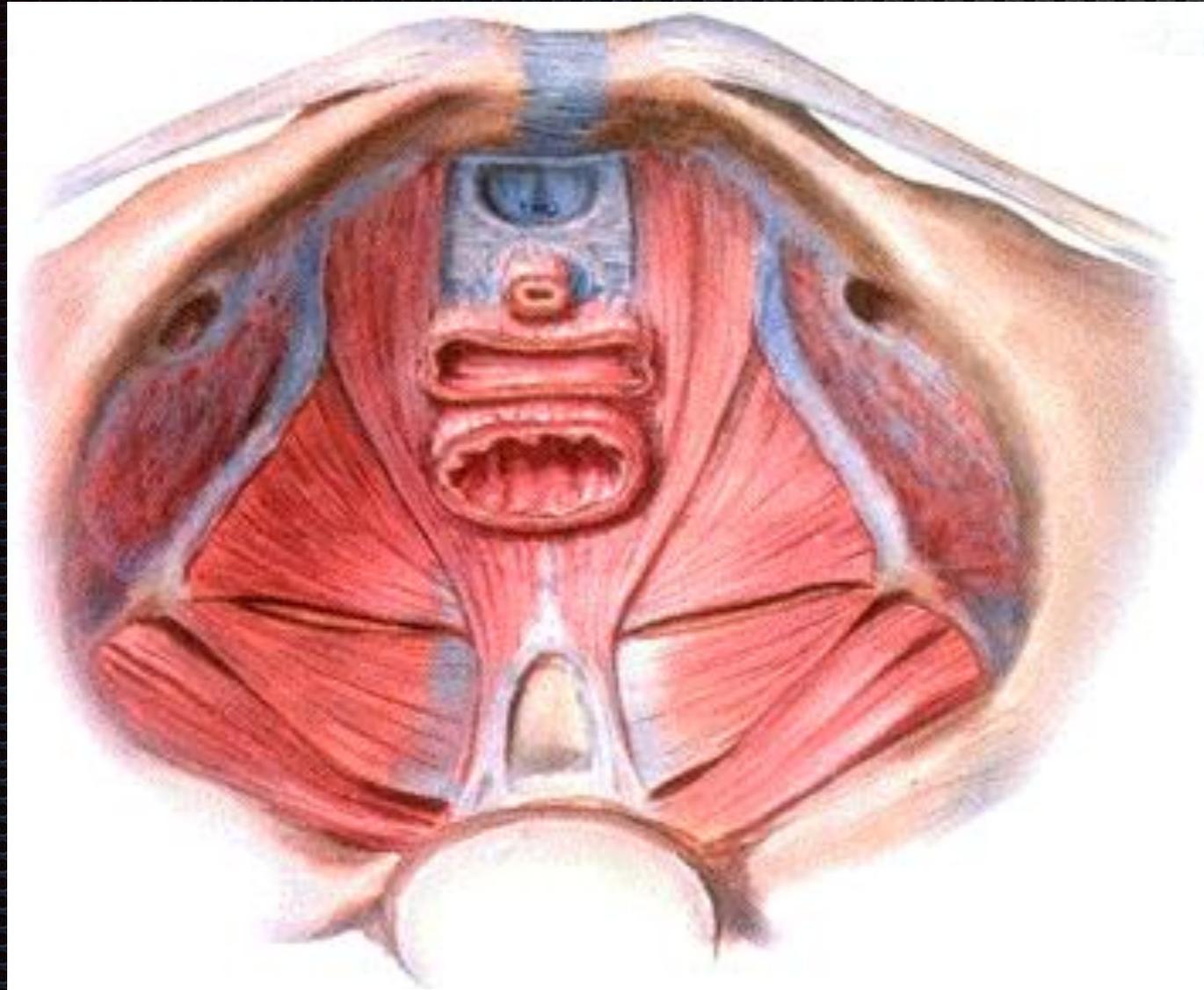


S Frigo, O Garbin, R Wolfram

Le fascia recto-vaginal Niveau III

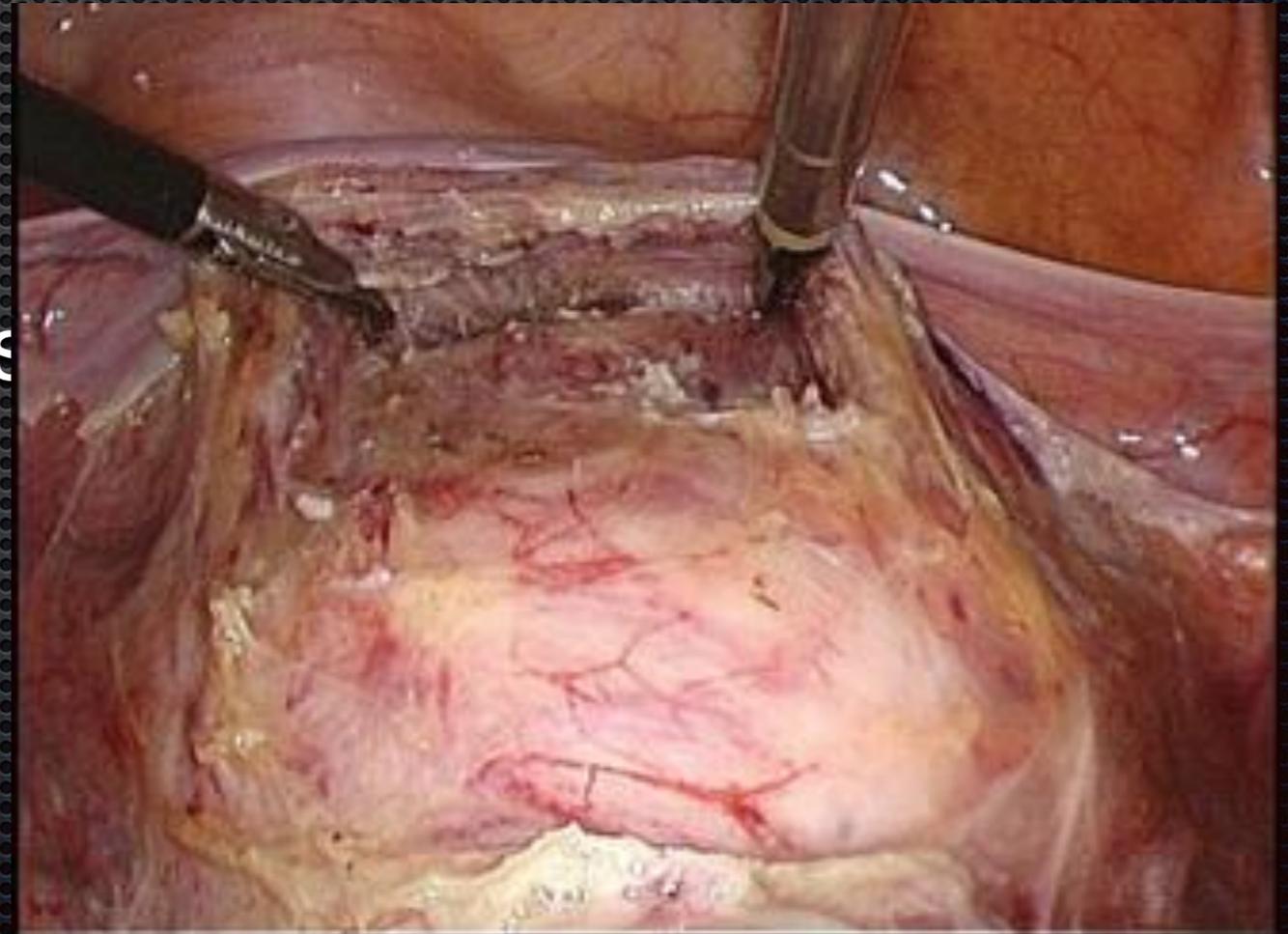


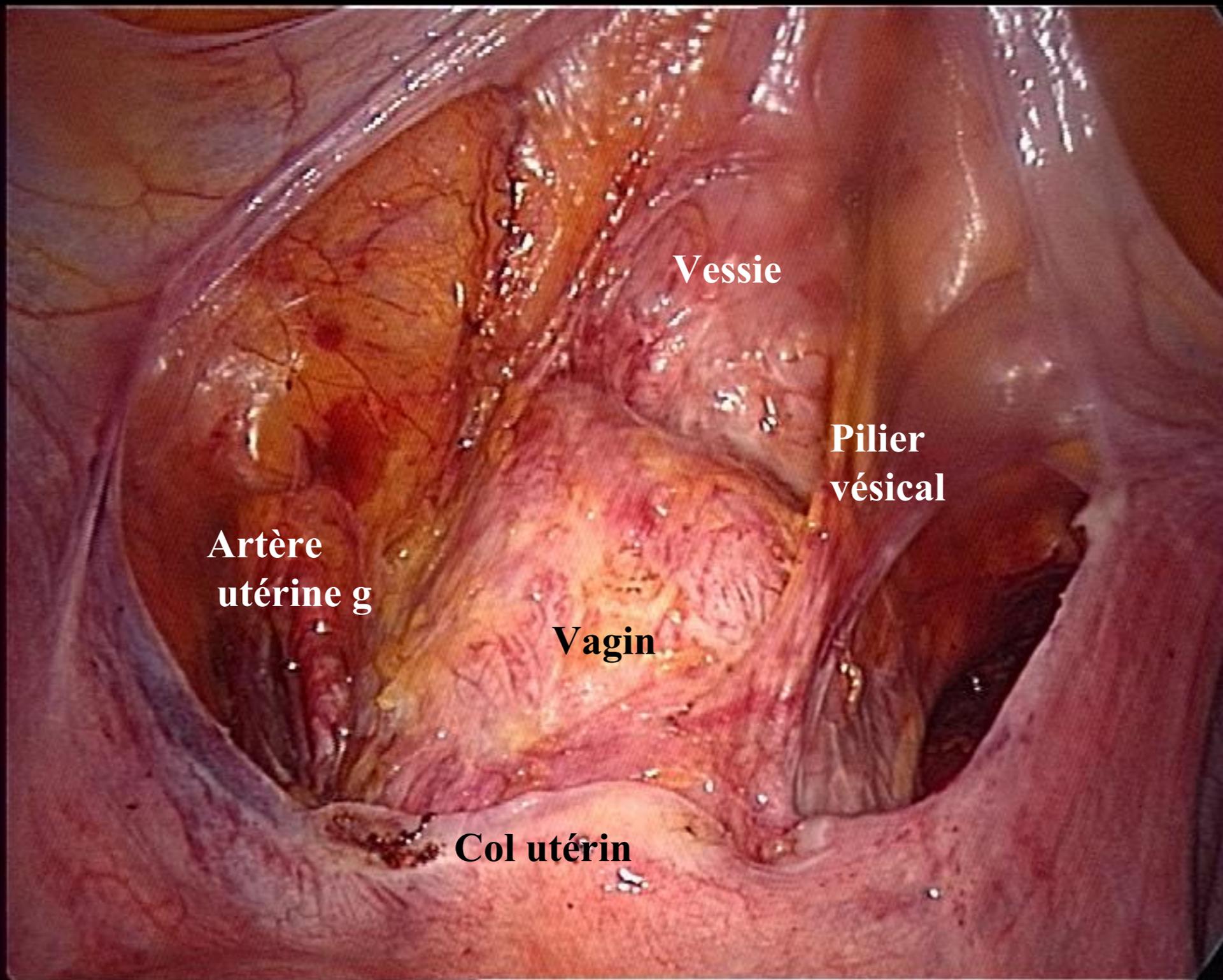
artère rectale moyenne



Dissection de l'espace antérieur

- But : séparer la vessie du col de l'utérus et du vagin
- Repères anatomiques
 - ligaments vésico-utérins
 - le col vésical
 - le 4e espace (Yabuki)





Vessie

**Pilier
vésical**

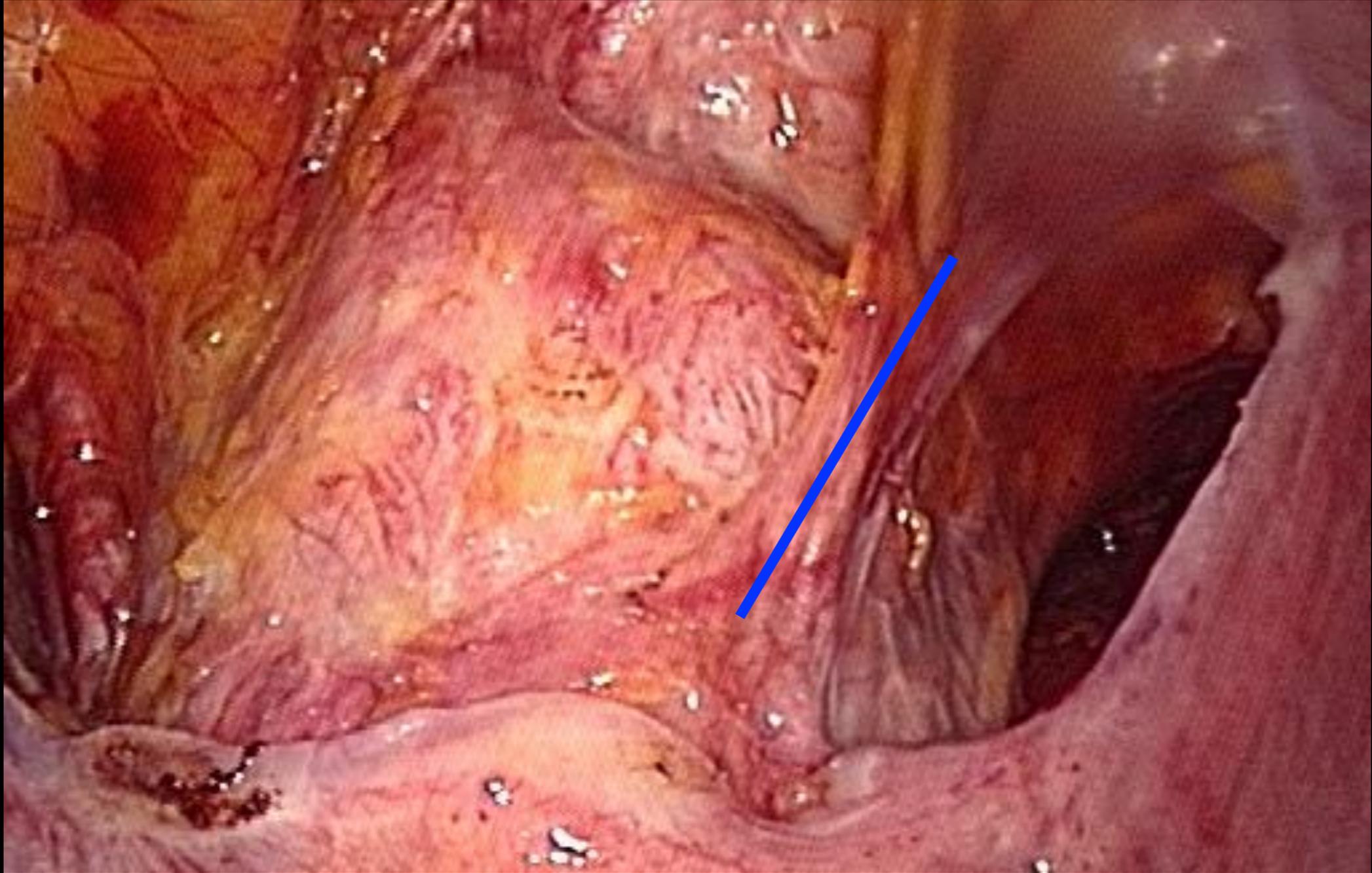
**Artère
utérine g**

Vagin

Col utérin

Ligaments vésico-utérins

- « Piliers de la vessie »
- 2 portions
 - Portion superficielle
 - antérieur et médian à l'uretère
 - Portion profonde
 - postérieure et externe/uretère
 - contient innervation autonome



4e espace (Yabuki)

- Dissection de la portion interne du ligt vésico-utérin
- entre l'uretère et le vagin

Conclusion

- anatomie = base
- sa connaissance permet d'éviter pièges de la chirurgie
- région du promontoire et ses variations +++