

Resection of the Longitudinal Vaginal Septum

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Background: A longitudinal vaginal septum results from incomplete fusion of the Mullerian ducts. These may be asymptomatic or present with menstrual symptoms or dyspareunia. Traditional septum removal involves surgical excision with clamps and suture. Development of instruments for minimally invasive surgery offer unique improvements in the procedure with excellent outcomes.

Case Series: Five Women, ages 17-32 presented with a diagnosis of a complete longitudinal vaginal septum associated with uterus didelphys, bicollis. Presenting symptoms were inadequate menstrual control, dyspareunia, dysmenorrhea and heavy menses.

Septum removal utilized ultrasonic shears (Ethicon Harmonic ACE+ Shears 5x23). This device has the least thermal spread with lowest blade temperature and 21% more rapid coagulation and cutting than earlier ultrasonic devices.

No complications occurred. Blood loss was minimal. All had excellent healing without scarring, abnormal vaginal caliber or functional impairment.

Conclusion: This advanced ultrasonic device allows efficient, rapid removal of vaginal septae with excellent surgical results.