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Ovarian drilling

Ovarian drilling is a procedure performed at the time of laparoscopy (see handout). During the procedure, 10-14 holes are made into the surface of the ovary with a diathermy probe (a needle through which an electric current is passed generating heat). This does injure the small area of the surface of the ovary and drains the fluid from some of the cysts (fluid-containing cavity). Not all cysts are drained.

Who has ovarian drilling performed?

The procedure may be performed in women with polycystic ovarian syndrome (PCOS) who desire a pregnancy and therefore need to ovulate.

How does the procedure work?

It is uncertain how ovarian drilling works. When polycystic ovarian syndrome was first recognised in the 1930's, a small section of the ovaries was cut out (wedge resection). This was performed to look at the ovary under the microscope as part of exploring the nature of the disease. An unexpected outcome from this procedure was that a number of women ovulated and became pregnant. This was used as the treatment for women who wanted a pregnancy and had polycystic ovarian syndrome for a number of years. Ovarian wedge resection did however have the unfortunate side-effect of causing scarring around the ovary. This meant that sometimes eggs were trapped on the ovary and could not be passed through to the tubes and therefore could not meet the sperm and be fertilised. The procedure of ovarian wedge resection therefore fell out of favor. Ovarian drilling is thought to be a less injurious form of wedge resection.

How effective is this procedure?

Studies have demonstrated that this procedure is as at least as effective as three cycles of ovulation induction with FSH (follicle-stimulating hormone, see handout). This means that roughly 30-40% of women will be pregnant six months after ovarian drilling. Most women found ovarian drilling preferable to FSH treatment. Ovarian drilling is associated with a lower risk of multiple pregnancy (twin and triplets). Duration of effect is uncertain. There is no guarantee that the procedure will be effective.

Are there any risks or complications from the procedure?

The risks and complications relate to the laparoscopy (see handout). The extra risk associated with ovarian drilling includes a very small risk of ovarian failure if the blood supply to the ovary is affected. The risk of ovarian scarring is uncertain as very few women have had second laparoscopies performed after ovarian drilling. Of the studies that have been performed the risk of ovarian scarring varies between 10-80%. This

scarring may or may not be of significance. It is uncertain whether ovarian drilling affects the risk of miscarriage.