

Minimally Invasive Surgery Transforms Women's Health Care

Women dealing with chronic pelvic pain, heavy bleeding or other gynecologic issues may find relief through the advanced surgical options available at OSF HealthCare.

[Rafael Marquez, MD](#), a minimally invasive gynecologic surgeon with [OSF HealthCare](#) and assistant professor of clinical obstetrics and gynecology at the University of Illinois College of Medicine Peoria (UICOMP), performs a range of procedures designed to help women heal faster and return to their normal routines.

"Some of the procedures I perform at OSF include minimally invasive hysterectomies, excision of endometriosis, ovarian cystectomies, operative hysteroscopy as well as repair of pelvic organ prolapse," Dr. Marquez says.

What "minimally invasive" means

Minimally invasive surgery is the ability to perform operative procedures using small incisions, Dr. Marquez says.

"What that means for patients, is they can expect to go home on the same day as their surgery. Benefits of minimally invasive surgery include improved post-operative pain, faster return to normal activities and normal recovery times," he adds.

Common conditions Dr. Marquez treats

The most common conditions Dr. Marquez treats include [endometriosis](#), [uterine fibroids](#) and [pelvic organ prolapse \(POP\)](#).

"[Endometriosis](#) affects about 10% of reproductive-aged women. Uterine fibroids are very common. By menopause, you can expect about 70-80% of women will have been diagnosed with a uterine fibroid," Dr. Marquez says.

"Although only 30-50% of those patients have symptoms due to fibroids."

Systematic pelvic organ prolapse (POP) occurs in roughly 3-6% of women, though examinations show up to 50% may have some degree of prolapse, even without symptoms.

While these conditions are not life-threatening, Dr. Marquez says they can significantly affect quality of life.

"Providing these minimally invasive procedures can help change lives for the better," he says.

When to talk to your OB/GYN

Unending pain and heavy bleeding are two symptoms that deserve attention. Dr. Marquez stresses the importance of open communication between patients and their OB/GYN.

"These are things your OB/GYN should be in constant communication and evaluation on to discuss if something like endometriosis or uterine fibroids are going on," he adds.

Endometriosis and uterine fibroids mainly affect women of reproductive age (ages 15-49), while pelvic organ prolapse becomes more common with age, though it can still affect younger women.

Prevention and treatment

Maintaining a healthy weight, prioritizing regular exercise, avoiding chronic constipation and straining and not drinking alcohol or smoking can help lower the risk of pelvic organ prolapse.

As part of a patient's continuum of care at OSF HealthCare, some of the conditions Dr. Marquez treats could also be treated using [pelvic floor therapy](#), a therapy that focuses on the three layers of muscle supporting the pelvic organs against gravity. OSF has specially trained pelvic rehabilitation specialists who can help patients through this process.

OSF HealthCare offers comprehensive treatment options for a wide range of gynecologic conditions, including:

- Endometriosis refractory to medical therapy (Stage I-IV)
- Interstitial cystitis / painful bladder syndrome
- Chronic pelvic pain
- Uterine fibroids
- Intra-uterine abnormalities
- Abnormal uterine bleeding
- Ovarian and fallopian tube surgery
- Pelvic organ prolapse (POP)
- Urinary incontinence

Learn more or schedule a consultation

Patients interested in learning more or seeking a surgical consultation with Dr. Marquez can call 309-308-3300.