Abstracts and Conclusions

Compiled From Published Papers on Female Sterilization

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The Filshie® Clip for Female Sterilization

Am J Obstet Gynecol. 2000;182(3)

The Filshie Clip for Female Sterilization: A Review of World Experience
AJ Penfield

Abstract
Laparoscopic tubal electrocoagulation continues to be widely practiced; however, mechanical devices such as the Yoon Band, the Hulka Clip, and most recently, the Filshie Clip are becoming more popular because of the avoidance of accidental electrical burns, the diminished likelihood of ectopic pregnancy, and, in the case of clips, the minimal degree of tubal destruction, thus allowing for maximum reversibility. This survey of worldwide reports from 1981 to the present reveals a high level of acceptance on the Filshie Clip because if its effective design and ease of application.

Contemporary OB/GYN. 1997;42(9):2-8

Modern Approaches to Female Sterilization
JE Rioux, AA Yuzpa

Conclusion
Laparoscopic tubal sterilization is safe and effective. Can we improve on it? We can make is safer by more rigorous laparoscopic technique. Can we make it simpler? Yes, by using better occlusion techniques that are more reliable, effective and safe, and that carry the greatest possibility of reversibility should the need arise. The Filshie Clip was not included in the CREST study, but we have very positive experience with it in Canada from the standpoints of efficacy, low failure rate, and a high degree of reversibility.

Curr Opin Obstet Gynecol.2001;13:377-381

Female Sterilization: An update
JE Rioux, M Daris

Conclusion
This brief update confirms that female sterilization is alive and well for many years to come. The preferred interval approach seems to be the laparoscopic technique, whereas the preferred postpartum method is minilap. The available techniques are now at the adult stage: the last one, the Filshie Clip, being 20 years old. In expert hands they are good and very efficacious and when performed on normal healthy patients they are safe.

7th Annual Meeting of the International Society for Gynecological Endoscopy. 1998:145-158 Internatinal Proceedings Division, Monduzzi Editore S.p.A. Bologna, Italy

Day Case Sterilisation with the Filshie Clip Nottingham. Ten-Year Follow-up Study:
The First 200 cases
GM Filshie, K Helson and S Teper

Summary

Cont...

Surgical sterilisation is the dominant method of fertility control among couples once family building is complete. Developments in endoscopic techniques have been a major factor in facilitating this situation. The Filshie Clip permits the procedure to be undertaken safely with local anaesthesia. This paper gives preliminary results on the first 200 cases from a series of 400 women involved in a long-term follow-up in England. Operative complications were rare, one failure occurred, and the method was highly acceptable to the patients.

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Laparoscopic Sterilization – A Comparison of Hulka-Clemens and Filshie Clips
PJ Toplis, MRB Newman MD, G Gillmer, WR Tingey

Summary

A prospective randomized comparison of the perioperative difficulties and modality associated with laparoscopic sterilization using Hulka-Clemens or Filshie clips was undertaken in 200 women. Anaesthtic and operative procedures we standardized. Perioperative pain was assessed using an analogue scale. The Filshie Clip was found to be superior to the Hula-Clemens Clip in that its larger capacility and atraumatic locking device made it easier to occlude thick tubes. The Filshie applicator device was also simpler to use and maintain. There was no significant difference between the two groups with respect to postoperative pain and both techniques carried a low complication and failure rate with tubal transaction occurring only once in the trial.

J Fam Plann Reprod Health Care. 2002;28(1):34-35

Female Sterilisation with Filshie Clips: What is the Risk Failure? A Retrospective Survey of 30,000 applications
GT Kovacs, AJ Krins

Conclusion

The estimated failure rate of Filshie Clip sterilisation in the state of Victoria carried out by specialist gynaecologists was between 2 and 3 per 1,000 sterilisation operations.

The Filshie Clip and Postpartum

Contraception. 2004;69(4)

Randomized Trial to Compare Perioperative Outcomes of Filshie Clips vs. Pomeroy Technique for Postpartum and Intraoperative Cesarean Tubal Sterilization: A Pilot Study
BA Kohaut, BL Mussellman, L Sanches-Ramos, AM Kaunitz

Conclusion

Cont...

This pilot study suggests that obstetric sterilization with the Filshie Clip represents a quicker, easier alternative when compared with the Pomeroy method. Accordingly, the Filshie Clip has the potential to establish a new standard of care for postpartum and intrapartum caesarean sterilization.

Int J Gynaecol Obstet. 1990;33:263-267

Comparative Study of Filshie Clip and Pomeroy Method for Postpartum Sterilization
JS Yan, J Hsu, CS Yin

Abstract

A prospective randomized comparison of the perioperative complications and long-term sequelae between the Filshie Clip and Pomeroy method was undertaken in 200 postpartum women at Tri-Service General Hospital, Taipet, Taiwan. The perioperative complications in either group were mild and infrequent. One pregnancy in the Pomeroy group was reported after follow-up of 24 months. No significant difference between the twop groups was found with respect to long term seqelae.

Contraception.1996;54:309-311

An Evaluation of the Filshie Clip for Postpartum Sterilization in Australia
AH Graf, A Staudach, H Steiner, D Spitzer, A Martin

From Discussion Section

In general it may be said that the Filshie Clip was easy to use and the technique of its application was relatively simple to perform without incidence of failure or equipment/method complications.

From the results of this study conducted on an initial population of 282 subjects with a two-year follow-up period, it can be concluded that the Filshie Clip, when correctly applied, is a safe, efficacious and acceptable method of surgical sterilization in the postpartum period.

International Society for Gynecologic Endoscopy. Presented at the 12th Anual Congeress, 2003, Cancun, Mexico

Postpartum Female Sterilization
KN Slim

Conclusion

Postpartum laparoscopic female sterilization appears to be simple and safe procedure when conducted by an experienced surgeon.

Reversal

Institute of Obstetrics and Gynaecology Trust. 1997

Reversal of Female Sterilization Experience in a District General Hospital
PN Nwagbara, HM Stribbe, AJ Browning, AM Tonks

Conclusion

Sterilization should be viewed as a permanent procedure. The problem of request for reversal could, however, be minimized by identifying the high-risk group such as the under 30s and those having problems in their relationship. These should be counselled on other methods which are equally effective such as the progesterone injection or implants. Sterilization should only be performed in this group as a last resort by using the most atraumatic method, such as the single application of the Filshie Clip in the isthmal part of the tube. This would allow a subsequent isthmic-istmic anastomosis which has a success rate of over 80 percent if the need for reversal arose in the future.

Magnetic Resonance Imaging

Effects of Magnetic Resonance Imaging (MRI) on Filshie Clips
RS Mezrich

Conclusion

There was no deflection of the Filshie Clip, consistent with the fact that the device contains no magnetic or magnetisable components. No turning motion (torque) of the Filshie Clip induced by application of gradient pulses was observed. There was no measurable temperature change.