

A COMPARISON OF SHORT TERM SEXUAL FUNCTION OUTCOMES FOR PATIENTS UNDERGOING THE TRANSVAGINAL MESH PROCEDURE USING THE STANDARD POLYPROPYLENE MESH VS A HYBRID POLYPROPYLENE/POLIGLECAPRONE MESH

Hypothesis / aims of study

To assess sexual function outcomes in patients undergoing the transvaginal mesh (Prolift) procedure using either the standard polypropylene mesh or a hybrid mesh composed of polypropylene and absorbable poliglecaprone 25 (Monocryl) fibers (Prolift+M) for pelvic organ prolapse through a comparison of pre- and post-operative responses to the Pelvic Organ Prolapse Urinary Incontinence Sexual Questionnaire (PISQ-12).

Study design, materials and methods

This is a retrospective cohort study assessing short-term sexual health as measured by the PISQ-12 following surgical correction of pelvic organ prolapse. Patients that underwent the Prolift+M surgery between 8/13/08 and 6/06/09 were included and compared to age-matched, sexually active controls that underwent the standard Prolift procedure between 2/14/05 and 6/06/09. All patients completed the PISQ-12 questionnaire and had POPQ measurements taken preoperatively and at 4 months postoperatively.

Results

Out of a total of 102 patients who met inclusion criteria, 71 patients had completed both preoperative and postoperative PISQ forms (n=39 standard mesh, n= 32 +M mesh). There is no significant difference in preoperative PISQ scores, age, BMI, POPQ points Ba, Bp, C and tvl (total vaginal length). There is also no significant difference in change in vaginal length from pre-op to post-op between the two groups. There is a significant improvement in postoperative sexual desire (PISQ #1), comfort with intercourse (PISQ #5), and overall sexual function (Total PISQ Score) with the hybrid mesh compared to the standard mesh at 4 months postoperatively.

Table 1 Comparison of Preoperative Variables

Pre-op Variables	Standard Mesh Mean (SD) N=39	Hybrid Mesh Mean (SD) N=32	P Value*
Age	56.53 (±8.33)	56.67 (±8.02)	0.93
BMI	27.65 (±6.41)	26.17 (±4.025)	0.17
POPQ Ba	1.20 (±2.01)	0.95 (±1.72)	0.51
POPQ Bp	3.18 (±0.83)	3.32 (±0.64)	0.37
POPQ C	-3.51 (±3.72)	-3.74 (3.59)	0.75
POPQ tvl	8.67 (±1.23)	9.09 (±1.23)	0.09

*P values calculated using Independent-Samples T Test

Table 2 Differences in Postoperative and Preoperative PISQ Scores after Transvaginal Mesh Placement

PISQ Question #	Standard Mesh Mean (SD) N=39	Hybrid Mesh Mean (SD) N=32	P value *
1	0.10 (±0.78) P=0.42+	0.54 (±0.79) P=0.001+	0.03
2	0.13 (±0.99)	0.44 (±0.97)	0.20
3	0.17 (±0.77)	0.27 (±0.87)	0.63
4	0.16 (±0.90)	0.13 (±0.90)	0.88
5	-0.38 (±1.71) P=0.17+	0.56 (±1.31) P=0.04+	0.02
6	0.39 (±0.92)	0.61 (±0.95)	0.32
7	0.38 (±1.19)	0.66 (±0.97)	0.30
8	1.41 (±1.52)	1.58 (±1.36)	0.63

9	0.5122 (\pm 1.18579)	0.7500 (1.14)	0.39
10	0.0000 (\pm 1.02470)	0.19 (\pm 1.00)	0.44
11	0.0750 (\pm 0.91672)	0.17 (\pm 0.38)	0.59
12	0.5278 (\pm 0.99960)	0.76 (\pm 0.87)	0.33
Total PISQ Score	3.00 (\pm 5.40) P=0.001+	6.25 (\pm 5.57) P<0.001+	0.02

P values calculated using:

- * Independent-Samples T Test,
- +paired T test

Interpretation of results

In this cohort, overall sexual function (Total PISQ score) improves with the use of transvaginal mesh. This improvement is greater with the use of a hybrid mesh compared to the standard mesh. There is also a significant improvement in postoperative sexual desire (PISQ #1), comfort with intercourse (PISQ #5) with the hybrid mesh compared to the standard mesh at 4 months postoperatively.

Concluding message

Pelvic floor-related sexual health as defined by changes in the PISQ-12 improves with treatment of prolapse using the transvaginal mesh technique. This improvement appears to be greater in the short-term when a hybrid mesh composed of permanent and absorbable fibers is used when compared to the traditional all-polypropylene mesh in this small cohort study.

References

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Is this a clinical trial?

No

What were the subjects in the study?

HUMAN

Was this study approved by an ethics committee?

Yes

Specify Name of Ethics Committee

St. Luke's Hospital and Health Network Institutional Review Board

Was the Declaration of Helsinki followed?

Yes

Was informed consent obtained from the patients?

Yes