

## REVIEW OF TWO NEWS SURGICAL TECHNIQUES: TRANSOBTURATORY AND TRANSPERINEAL, FOR TREATMENT OF PELVIC ORGAN PROLAPSE.

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#### OBJECTIVE:

The high amount of recurrences of POP surgery using classical techniques had as result the out coming of supporting material: polipropilene meshes. The last generation of them are transobturatory and transperineal mesh. The objective of this assay is to evaluate the use of a transobturatory mesh for cystocele repair and a transperineal one for medium prolapse and posterior prolapse.

#### Material

35 patients were operated on POP grade III (Baden-Walker classification). The different defects on pelvic floor were treated according to the location and the existence of SUI: perigee±apogee±monarc®. The mean age was 61.76 years; with a medium of 2.48 children per patient .Before the operation 17 patients had SUI (48.6%), 13 urgency (37.14%), 35 women anterior vaginal wall prolapse (100%), and 23 medium and posterior vaginal wall prolapse (65.7%). A ten visual analogue satisfaction score (VAS). (From 0= no satisfaction to 10= total satisfaction) was fulfilled by and external interviewer. The final number of vaginal prosthesis was 76.

#### RESULTS

The mean follow up is 10 months (4-20). Early complications were: Pelvic haematoma treated with extraperitoneal laparotomy, and one vaginal haematoma, drained spontaneously.

We had 4 vaginal erosions: 2 on the anterior vaginal wall (5.2%), the same patients with the haematoma; and 2 on the posterior vaginal wall. All of them have been treated conservatively with vaginal oestrogenotherapy.

After surgery 7 patients had SUI: 5 de novo incontinence (27.7%) and 2 recurrent stress in continence (11.8%). 13 patients had urgency previously: 11 (84.6%) were cured, and 2 patients have again urgency (15.4%). We realized urgency de novo in 3 patients (13.6%). The visual analogue satisfaction score mean (VAS) was 7,9 . We observed recurrent cystocele in 6 patients: 2GIII, 3GII, an 1 GI; medium vaginal prolapse wall in 6 patients: 1GI, 4GII and 1 GIII; and rectocele in 7 patients: 2GI, 3GII, and 2 GIII.

#### CONCLUSION

The use of transobturator and transperineal meshes for urogenital prolapse treatment has good functional results with a low morbidity. Although it is necessary a longer follows up and comparative studies with the classic surgical procedure.

<b>Specify source of funding or grant</b>	<b>We don't have any specify source of funding or grant.</b>
<b>Is this a clinical trial?</b>	<b>No</b>
<b>What were the subjects in the study?</b>	<b>HUMAN</b>
<b>Was this study approved by an ethics committee?</b>	<b>Yes</b>
<b>Specify Name of Ethics Committee</b>	<b>Comité Ético y de Investigación del Hospital Universitario del Río Hortega de Valladolid. Spain</b>
<b>Was the Declaration of Helsinki followed?</b>	<b>Yes</b>
<b>Was informed consent obtained from the patients?</b>	<b>No</b>