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PELVIC ORGAN PROLAPSE TREATMENT WITH GYNECARE PROLIFT SYSTEM – OUR EXPERIENCE.

Hypothesis / aims of study

The aim of the study is to present our experience in the pelvic organ prolapse (POP) repair with Gynecare Prolift system.

Study design, materials and methods

Between February 2006 and Febryary 2010 we inserted 112 Prolift meshes for POP repair. Patients' mean age was 62,3 years (+/-14,21 years). Mean BMI was 23,2 kg/m2

(+/- 4,22). 23 women had an isolated cystocoele, 13 women had vaginal prolapse and 69 had uterine prolapse. 7 patients presented with uterine cervix prolapse. 17 presented with massive enterocoele. 29 complained about concomitant stress urinary incontinence. All POP was described according to POP-Q standard. 36 women had cystocoele repaired with Prolift Anterior only and 69 had a Prolift Total repair. 7 patients had a Prolift Posterior repair only. Among 36 women with Prolift Anterior cystocoele repair, 9 had a simultaneous, traditional sacrospinous ligament vagina / uterus fixation. 11 women underwent a concomitant vaginal hysterectomy. The patients were followed-up one month and afterwards every three months after surgery.

Results

The mean follow-up has been 25 months now. In 97 patients (86,6%) we have achieved a complete cure of POP or significant improvement according to POP-Q stage. In 12 patients (10,7%) the improvement was satisfactory with patients' subjective impression

of cure with less satisfying objective POP-Q evaluation. In 4 patients (3,6%) the Prolift repair proved unsuccessful and another repair was done. There were 6 cases of mesh erosion

- 2 Prolift Posterior meshes and 4 Prolift Anterior meshes. There was one important intraoperative bleeding with hemoglobin drop from 12,4 to 6,5 g/dl.

Interpretation of results

The Gynecare Prolift system seems an efficient way of POP correction in women. The technique is relatively safe, easily applicable, with low risk of complications. The most frequent complication is mesh erosion.

Concluding message

According to our experience the technique can be recommended to treat pelvic organ prolapse in women.

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Is this a clinical trial?	No
What were the subjects in the study?	NONE