

## SEXUAL FUNCTIONING AFTER TENSION FREE VAGINAL MESH PROCEDURE (PROLIFT®) FOR PELVIC ORGAN PROLAPSE.

### Hypothesis / aims of study

The aim of the study is to evaluate sexual functioning after Tension free Vaginal Mesh procedure (Prolift®).

### Study design, materials and methods

In a prospective cohort study in two centres, specialised in pelvic organ dysfunction, prolapse surgery with the Prolift® system was undertaken from September 2005 onward. Preoperatively all patients filled in a disease-specific quality of life questionnaire (Urogenital Distress Inventory (UDI) and Incontinence Impact Questionnaire (IIQ))<sup>1</sup>. Four questions, dealing with sexual functioning, are added to these questionnaires.

1. How much influence has your prolapse on the ability to have a sexual relationship ?

2. How often do you have sexual intercourse?

3. Do you have pain during sexual intercourse?

4. Is your vagina too narrow to have sexual intercourse?

Surgery was performed by four gynaecologists, trained for the Prolift procedure. Complications were registered. Patients were examined six months after surgery. (POP-Q and disease-specific quality of life questionnaires) Data were analysed with SPSS, version 12.0.1, Wilcoxon Signed Rank test was used.

### Results

118 patients underwent prolapse surgery with a Prolift® procedure. 21 patients had a Prolift® anterior, 52 had a Prolift® posterior, 22 had a Prolift® totalis and 23 had Prolift® anterior+posterior. Median age was 66 years (range 19-86). 78% was postmenopausal and 51% had co-morbidity. 61% of the women were sexually active.

Table 1.

Question/answer	Pre-operative n=106	Post-operative n=60
<b>1. How much influence has your prolapse on the ability to have sexual intercourse?</b>		
No influence	30%	52%*
A little influence	26%	23%*
Rather much influence	22%	7%*
Very much influence	11%	3%*
Missing	10%	15%
<b>2. How often do you have sexual intercourse?</b>		
Never	39%	30%
Less than once a month	11%	15%
Once or twice a month	25%	22%
Once a week	13%	17%
More than once a week	6%	5%
Missing	6%	11%
<b>3. Do you have pain during sexual intercourse?</b>	n=65	n=42
No, or not at all bothersome	55%	55%
Yes, a little	15%	24%
Yes, rather troublesome	19%	5%
Yes, very much	10%	2%
<b>4. Is your vagina too narrow to have sexual intercourse?</b>		
No, or not at all bothersome	86%	81%
Yes, a little	5%	5%
Yes, rather troublesome	5%	0
Yes, very much	3%	0
Missing	1%	14%

\* p<0.05

### Interpretation of results

The presence of Pelvic Organ Prolapse has a clear negative influence on the ability to have sexual intercourse. This negative influence decreases after Prolift® operation. Prolift® operation increases the rate of sexual intercourse and decreases pain during intercourse, but statistical significance is not reached. Significant narrowing of the vagina did not occur.

### Concluding message

Prolift operation for pelvic organ prolapse does not increase dyspareunia. After the operation the negative influence of the prolapse on the ability to have sexual intercourse is decreased.

#### References

1. Measuring health-related quality of life in women with urogenital dysfunction: the urogenital distress inventory and incontinence impact questionnaire revisited. *Neurol Urodyn* 2003;22:97-104.

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**HUMAN SUBJECTS:** This study was approved by the CMO regio Arnhem-Nijmegen and followed the Declaration of Helsinki Informed consent was not obtained from the patients.