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# **BONE ANCHORED SACROCOLPOPEXY SAFETY AND EFFICACY**

### Hypothesis / aims of study

Sacrocolpopexy remains an important procedure for correcting severe vaginal prolapse. A variety of techniques exist for this operation, including several types of mesh material. We describe our technique of sacrocolpopexy utilizing bone anchors and Gore-tex® mesh.

# Study design, materials and methods

From January 2004 through December 2006, we performed 23 sacrocolpopexies via the abdominal approach. The posterior supports were afforded by Mitek® G-II bone anchors, placed in the sacral promontory with Gore-Tex ® mesh as the bridge to the vaginal wall, in every patient. All patients underwent a mid-urethral sling at the same procedure.

#### Results

Patient ages ranged from 42-81. Average hospitalization was 2.9 days (1-7) and there were no major complications. Minor complications included two superficial wound infections (9%), ventral hernia in 1 (5%), and persistent urge incontinence in 1 (2%). No patient has recurrent stress incontinence at an average follow up of 13 months. There were no recurrences of prolapse, and there were no erosions. There were no incidences of graft infection, bowel injury, or need for transfusion.

### Interpretation of results

The advantage of this technique is a solid repair with a material that has minimal biological reactivity. The absence of erosions is interesting, but since none of the procedures was combined with hysterectomy, this may have reduced that expended incidence.

## Concluding message

This procedure has withstood the test of time and we believe may serve to be the procedure against which the transvaginal vault repairs should be compared.

Charify acress of funding or great	No funding
Specify source of funding or grant	No funding
Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	No
This study did not require eithics committee approval because	Retrospective chart review
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	No