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REDUCING LENGTH OF STAY IN TRANSVAGINAL PELVIC ORGAN PROLAPSE REPAIR

Hypothesis / aims of study

We evaluated whether patients undergoing major pelvic organ prolapse repair could be discharged safely on the first postoperative day if a strict care pathway is followed.

Study design, materials and methods

All patients undergoing transvaginal prolapse repair between February, 2005 and July, 2007 by a single surgeon had a strict protocol followed during their hospital stay (figure 1). Immediately postoperatively, patients received a regular diet, oral narcotics, and were ambulated. Charts were retrospectively reviewed to determine length of stay, transfusion rates, emergency room visits, and rates of urinary retention.

Results

94 patients were included. These included 60 transvaginal repairs with mesh, 11 sacrospinous fixations, 10 posterior repairs, 7 colpocleises and 6 anterior repairs.The median patient age was 58 years (range 35-93). Mean length of stay was 28.5 hours. Eighty-one (86%) patients were discharged on the first postoperative day. Three patients (3.2%) presented to the emergency room within one month of surgery, one of who had to be admitted with a lower extremity deep-venous thrombosis. No patients required transfusion. Twenty-three (25%) patients were discharged with a foley catheter.

Interpretation of results

By following our strict care pathway, the majority of women were able to be safely sent home one day after surgery.

Concluding message

Transvaginal pelvic organ prolapsed repair can be performed safely with the majority of patients requiring at most an overnight hospital stay. As we continue to evaluate minimally invasive approaches to these surgeries, this data will provide a benchmark against which to compare the benefits or newer approaches.

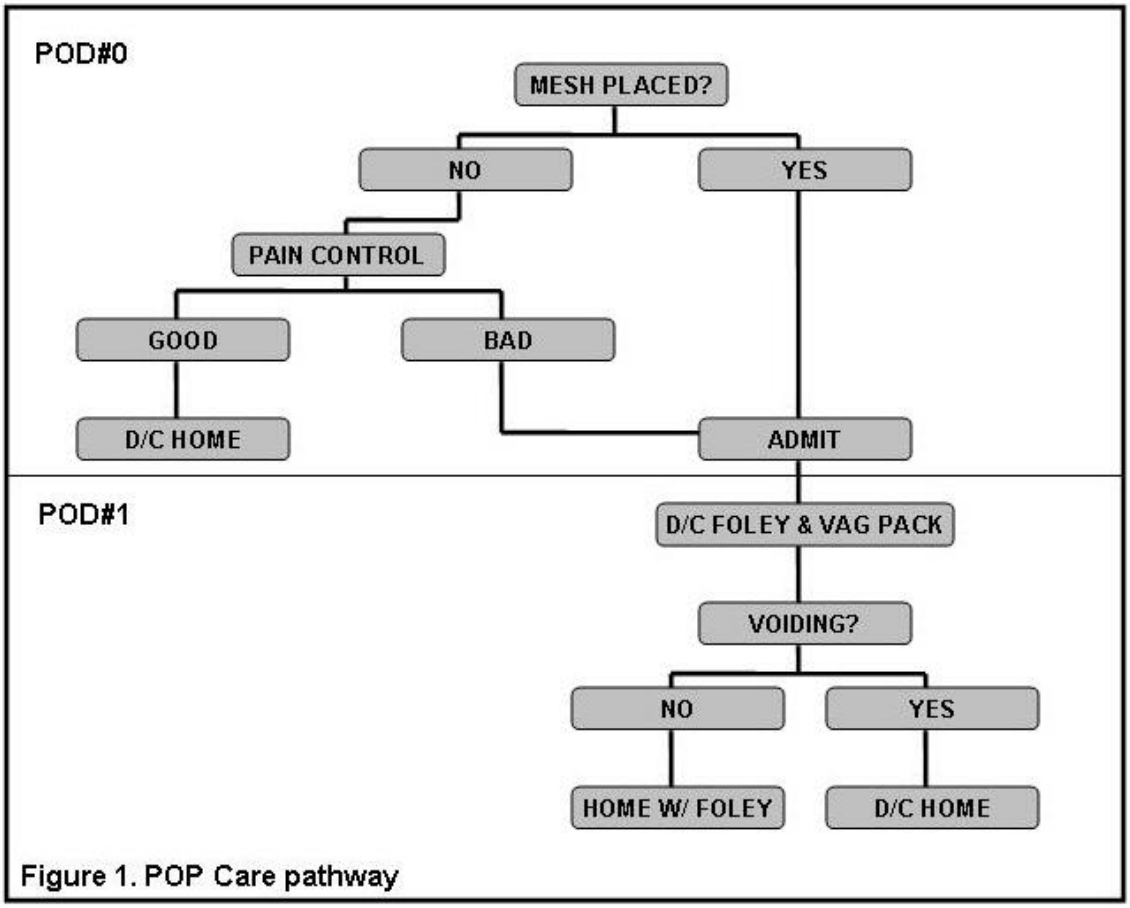

Figure 1. POP Care pathway

Specify source of funding or grant	**None**
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	**Institutional Review Board, Cleveland Clinic**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**