

INFLUENCE OF TRANS VAGINAL MESH PROCEDURE ON QUALITY OF LIFE IN PATIENTS WITH PELVIC ORGAN PROLAPSE: SHORT-TERM OBSERVATION.

Hypothesis / aims of study

Pelvic organ prolapse occurs in 50% females after 50. About 10-20% of them require surgery for this condition [1]. Prolapse intensity, especially in stage III and IV evaluated by Pelvic Organ Prolapse Quantification, cause such symptoms as feeling of tension, pain, difficulty in micturition, defecation and physical activity. Symptoms connected with pelvic organ prolapse cause many problems in daily life and deteriorate quality of life significantly. The goals of reconstructive surgery in the treatment of pelvic organ prolapse (Trans Vaginal Mesh procedure) are not only restoration of proper anatomy and function of pelvic organs, but also positive influence on quality of life [2]. The aim of the study was the assessment of quality of life after the treatment of genital prolapse by vaginal route using synthetic prostheses following Trans Vaginal Mesh (TVM) technique.

Study design, materials and methods

Forty five women aged 40-79 (mean age: 59.2 ± 8.98) who underwent insertion of a posterior (6 patients, 13.3%), anterior and posterior (37 patients, 82.2%) and total (2 patients, 4.4%) low-weight polypropylene mesh by the vaginal route between June 2008 and January 2009 had short-term follow-up. Prolapse severity before operation was evaluated using Pelvic Organ Prolapse Quantification according to ICS recommendations. Nine patients (20%) presented stage IV POPQ, 30 patients (66.6%) had both cystocele in stage III and rectocele in stage II POPQ and the last group of 6 patients (13.3%) presented stage III of rectocele. All had a subjective feeling of prolapse. The follow-up period varies from 6 to 8 weeks after surgery. To describe quality of life the patients answered a validated self-assessment questionnaire SF-36 before and after 6 to 8 weeks after surgery. The SF-36 questionnaire contains of 11 questions concerning health in general, current health compared to one year previous, limitation in activities during a typical day, during work, influence state of health on emotional problems, level of pain and interference with normal activities.

Results

Research did not reveal statistically significant differences in perception of health in general, however answers for the question concerning health improvement after surgery compared to one year prior showed statistically significant difference ($p < 0.001$ CI=95%). No limitation in activities was observed after treatment during a typical day compared to pre-surgery period ($p < 0.01$). We showed a statistically significant difference with reference to the influence of physical health on the time and the type of work in favor of the period after treatment ($p < 0.05$). There were no differences in interfere of patients health with normal social activities with family or friends. Also there were no statistically significant differences in the pain feeling level. We observed statistically significant improvement with reference to feeling of depression and nervousness in patients who underwent surgery.

Interpretation of results

Because of short term follow up, when wound healing processes are not finished, there can be an influence on pain and anatomical pelvic organs function. Data from the SF-36 validated questionnaire clearly show that surgery outcome does not only improve the anatomy of pelvic floor but also significantly influence on patients' general health and well being. This is the preliminary report shows that the reconstructive surgery helps to restore all parameters of WHO health definition. We have to wait for the results from at least six months to confirm this preliminary observation.

Concluding message

Modern surgical management of genital prolapse using a polypropylene mesh proved to improve the quality of life patients in short-term observation.

References

1. Cutner AS, Elneil S. The vaginal vault. BJOG. 2004 Dec;111 Suppl 1:79-83
2. Monga A. Management of the posterior compartment. BJOG. 2004 Dec;111 Suppl 1:73-78

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<i>Was the Declaration of Helsinki followed?</i>	Yes
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