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USE OF PESSARIES FOR URINARY INCONTINENCE AND PELVIC ORGAN PROLAPSE-SERVICE DEVELOPMENT PATIENT SURVEY

Hypothesis / aims of study

Hypothesis

Pelvic organ prolapse and urinary incontinence (UI) often co exist (1). Correction of genital prolapse can unmask pre-existing UI symptoms (2). Pessaries that treat genital prolapse and UI simultaneously have recently been introduced (3). It is important to assess the women's view on their experience with these pessaries.

Study design, materials and methods

- The data was collected prospectively on 52 consecutive women who had the continence pessary (Mediplus milex incontinence dish pessaries) fitted over a period of 10 months from 4/7/2008 to 14/5/2009)
- This was followed by a patient survey sent to women who had the pessaries fitted at a mean post pessary insertion period of 11 months.
- Place of study – District general hospital in the UK
- The Data was collected and analysed

Results

-Response rate of survey questionnaires: 33/52 (63%)
-Age range of patients: 42-90 yrs (mean age-70 yrs)
-Parity range: 1- 4 (mean parity-2)
- The indication of use of the pessary- awaiting surgery (3%), informed choice (74%), unfit for surgery (23%)
- Type of pelvic organ prolapse- anterior compartment prolapse (97%), posterior compartment prolapse (67%) middle compartment prolapse (38%). Some of the women had more than one type of prolapse
- Stage of prolapse - stage 1 (4%), stage 2 (65%), stage 3 (27%) and stage 4 (4%)
- Symptoms of urinary incontinence before pessary was inserted-58% of women stated they had urinary symptoms prior to pessary insertion, 21% stated they had no urinary symptoms prior to pessary insertion, 21% did not answer this question
--Number of attempts taken to fit the pessary – fitted in the first attempt- 86%, fitted in 2 attempts- 14%
- Improvement in urinary symptoms after the pessary was inserted-71% reported moderate to great improvement and 29% reported minimal improvement
- Improvement in prolapse symptoms after the pessary was inserted- 24% reported minimal improvement, 76% moderate to great improvement
-Discomfort with the pessary in situ- 87% stated they had little or no discomfort from the pessary and 13% reported discomfort with the pessary
-Vaginal discharge with the pessary insitu-30% reported vaginal discharge all the time, 70% reported vaginal discharge sometimes or not at all
- Was the pessary still insitu -67% still had the pessary in place at the time of the questionnaire, 33% had to opted for other treatment
- Success of treatment-82% felt the pessary option was partly or completely successful, 18% felt the pessary was not successful in resolving their symptoms
- Would they recommend the treatment to a friend-81% said they would recommend the pessary to a friend with similar problems, 19% said they would not recommend it to a friend.

Interpretation of results

The results of our survey showed that pessaries for pelvic organ prolapse and urinary incontinence are easily inserted and the majority of women found them comfortable to use.

(71%) of women found moderate to great improvement in urinary symptoms and (76%) of women found moderate to great improvement in prolapse symptoms with these pessaries. Only (30%) noticed vaginal discharge all the time. At medium term follow up (mean 11 months) 67% of women still had the pessary insitu and 82% felt the pessary option was partly or completely successful in treatment of their symptoms and 81% said they would recommend the pessaries to their friends with similar symptoms

Concluding message

From our survey we conclude that the majority of patients found the pessaries for incontinence and prolapse symptoms are successful in treatment of prolapse and incontinence symptoms in patients waiting, unfit or those who do not want to have surgery. They are easy to insert and comfortable for the patients use.

References

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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 ethics committee approval because	**this was a service development survey done through the clinical governance department at our hopsital**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**