

PROSPECTIVE STUDY OF RING PESSARY TREATMENT FOR WOMEN WITH PELVIC ORGANS PROLAPSE

Hypothesis / aims of study

To identify effectiveness of ring pessary treatment for women with pelvic organs prolapse, and analyse the risk factors of treatment failure

Study design, materials and methods

This study prospectively analysed the visiting results of 66 women with pelvic organs prolapse 1 week, 1 month, and 3 months after implementation of pessary.

Results

Successful rates of satisfactory pessary fitting over 1 month and 3 months were 72.7(48/66) and 65.2%(43/66), respectively, with no significant differences between groups ($P > 0.05$). No complications were observed during the treatment. Pessary fitting results were not correlated with site or severity of POP. Risk factors that affecting pessary fitting include: pelvic organs prolapse combined with urinary incontinence, shortened vagina, widened vulval slit, previous pelvic construction surgery, and previous per vaginal surgery. Percentage of patients with urinary incontinence at first visit in failure group is 30.4%, which is higher than success group (9.3%); no significant difference was observed. No statistic significant difference was observed in our study between failure and success group on the factors discussed above ($p > 0.05$). Major cause of treatment failure is difficulty with management of pessary.

Interpretation of results

Based on the fact that majority of patients required repeated instructions of pessary management and adjustment of size, our study applied 3-month satisfactory placement as cut-point of treatment success and failure, and obtained success rate of 65.2%, which was consistent with other reports^[1, 2]. Because we haven't pessary with supportment in china yet, so we only use the ring pessary for our patients. It should decrease the successful fitting of pessary. However, our study results showed success rate of 1-month satisfactory placement was 72.7%, which was similar with the 3-month results, so it was considered that 1-month treatment is generally acceptable as assessment duration of treatment satisfactory.

Aggravated urinary incontinence of POP patients after pessary treatment was primarily due to alleviated obstruction of vesicourethral angle, which again leads to manifestation of pre-existed vesicourethral angle change, while pessary itself does not alter the mechanism of urinary continence. Our study still indicated a higher failure rate of pessary treatment for POP patients with urinary incontinence.

In our study, percentage of patients with anterior POP and entire POP was significantly higher than patients with middle and posterior POP, but the differences of success rates for pessary treatment of anterior, entire, middle and posterior POP were not statistically significant, which was consistent with other reports^[3]. Martina et al^[3] demonstrated that through placement of pessary in vaginal fornix, posterior POP symptoms were improved indirectly with supporting effects against paries posterior vaginae. Therefore, further investigation is necessary to identify whether the effectiveness of pessary for posterior POP had been ignored.

In our study, all patients kept visiting our clinic every 3-6 months after beginning of pessary treatment, and took out every night before sleep. No complication was found in our study. Therefore, effective management and instructions of pessary treatment, regular placement and cleaning of pessary, regular visiting every 2-3 months, careful observation of problems in pessary treatment were essential guarantee of preventing complications, and pessary treatment with standard following up is safe.

Concluding message

Ring pessary is an effective, cheap non-surgery treatment of pelvic organs prolapse, and a half of the patients receive this treatment with satisfactory. Not every patient with pelvic organ prolapse is able to adopt this treatment. One month could be used as a proper assessment period of satisfactory treatment.

References

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Is this a Randomised Controlled Trial (RCT)?	No
What were the subjects in the study?	HUMAN
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Specify Name of Ethics Committee	Peking Union Medical College Hospital Ethics Committee
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes

