1127

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LAPAROSCOPIC UTERINE SUSPENSION FOR TREATMENT OF PELVIC ORGAN PROLAPSE IN PATIENT WITH PRIOR WHOLE PELVIC RADIOTHERAPY FOR CERVICAL CANCER.

Laparoscopic Uterine Suspension for Treatment of Pelvic Organ Prolapse in Patient with Prior Whole Pelvic Radiotherapy for Cervical Cancer

Aims: To present the surgical techniques, feasibility, safety and short-term outcomes of a laparoscopic procedure for treatment of pelvic organ prolapse in patient with prior whole pelvic radiotherapy for cervical cancer.
Study design, materials and methods: A case report from a tertiary referral university hospital. A 71-year-old woman who was diagnosed stage IB cervical cancer and underwent whole pelvic radiotherapy 20 years ago presented with a prolapsed mass from the vagina and difficult voiding. Pelvic examination revealed pelvic organ prolapse (POP) stage III with hyperkeratosis of vaginal mucosa and multiple decubitus ulcers. Conservative treatment with a vaginal pessary was failure to improve her symptoms. Obliterated vaginal surgeries were contraindicated in this case because of pelvic fibrosis caused by radiation effects. Laparoscopic uterine suspension with a retroperitoneal mesh was performed after informed consent was obtained. A strip of synthetic mesh was introduced through bilateral windows created in the broad ligaments, and the middle part was sutured to the anterior pericervial endopelvic fascia. Both terminal ends of this strip were pulled through each of the bilateral abdominal ports and attached to the external oblique aponeurosis, to elevate the uterus. Cure of the uterovaginal prolapse was evaluated objectively by vaginal examination using the pelvic organ prolapse quantification (POP-Q) system.
Results: Laparoscopic procedure was successfully performed. Neither immediate nor late postoperative complication was observed. At 12 months follow up, the POP-Q score was normal. Her quality of life was good without recurrent symptoms.
Interpretation of results: The feasibility, safety and short-term outcomes were promising in this case report Laparoscopic uterine suspension allows restoration of the vagina length without compromising its caliber, and is therefore likely to have a favorable functional outcome.
Conclusions: Laparoscopic uterine suspension might be an alternative minimally invasive procedure for pelvic organ prolapse treatment in patient with conditions, in which vaginal surgery was prohibited.

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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 is a case report**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**