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## FEMALE SEXUAL DYSFUNCTION AFTER VAGINAL SURGERY FOR INCONTINENCE TREATMENT AND PELVIC ORGAN PROLAPSE

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### Objective

Our aim is to evaluate sexual function in women with pelvic organ prolapse compared with urinary incontinence. The idea is to compare a surgical technique which use biggest polipropilene meshes and biggest vaginal dissection, with a less invasive surgical technique.

### Material and Methods

69 women has been treated for stress urinary and 70 for pelvic organ prolapsed. Median age was 55.27 and 62.29 respectively. All patients were asked to answer a condition-specific self-administered questionnaire: the Female Sexual Function Index (FSFI©) and a ten visual analogue satisfaction score.

### Results

There are no differences between groups except in mean follow-up. The visual analogue satisfaction score mean was 7.63 and 7.79.

Although there are no difference in both groups speaking about sexual desire, incontinence group present less rates. And also this group fell less sexually aroused, and less confident and less satisfied with the level of sexual arouse.

Incontinence group present a better lubrication  
**prolapse group** reach orgasm more often, with less difficulty

There is no difference in satisfaction climax, emotional closeness with the partner, relationship, and overall sexual life. Although there are no differences, incontinence group experience less pain during vaginal penetration.

### Conclusion

The CONCLUSION is that although prolapse surgery seems to be more aggressive than incontinence one, there are no clear differences in sexual life repercussion. So, we do not be afraid about using support meshes.

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<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	Comité Ético y de Investigación del Hospital Universitario del Río Hortega de Valladolid. Spain.
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No