

CHARACTERISTIC OF WOMEN OPERATED ON FOR GENITAL PROLAPSE AND OUTCOME AFTER 6 MONTHS

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Aims of Study: To describe the characteristics of women operated for genital prolapse and evaluate the results of treatment after 6 months of surgery.

Materials and Methods: We evaluated 72 women operated for genital prolapse from January 2007 to September 2009. These women underwent correction of anterior, apical and / or posterior prolapses, stage 3 or 4, using a fascial defect repair or placement of mesh (Gynecare ®). Were recorded demographic and clinical characteristics such as age, race, parity and prior surgeries for correction of prolapse. It was considered the type of treatment performed and POP-Q satanting after 6 months of surgery. Prolapse stage II or less was considered as objective cure. The evaluation of the cases was done by collecting data from medical records. The study was approved by the Ethics Committee of the institution.

Results: The mean age of women enrolled in the study was 66.96 ± 8.46 years [46 to 83 years], with the highest frequency of occurrence among Caucasians (76.39%), followed by black (22.22 %) and yellow women (1.39%). The BMI (weight kg / height m²) of the group was 28.98 ± 4.11 kg/m². Twenty-eight women (38.9%) had been previously submitted to correction of prolapse with or without urinary incontinence treatment, and 20 corrections were performed for posterior prolapse (71.4%), 17 for anterior prolapse (60.7 %), and in 4 cases were performed for treatment of complete genital prolapse. 3 laparoscopic corrections were performed in this group for treatment of apical prolapse (2) and paravaginal (1). The women studied had an average of 4.07 ± 2.36 vaginal deliveries [1 to 11 deliveries]. In the immediate preoperative assessment there were diagnosed 60 anterior prolapsed (83.3%) [EIII = 43 (71.6%), EIV = 17 (28.3%)] posterior prolapse in 30 cases (41.7%) [EIII = 13 (43.3%), EIV = 17 (56.7% 0)] and apical in 28 of them (38.9%) [EIII = 11 (39.2%), EIV = 17 (60.7 %)]. 33 cases (45.8%) had only 1 prolapse, 14 cases (19.4%) 2 prolapses and in 25 of them (34.7%), 3 concomitant prolapses. There were performed 47 fascial defect repair surgeries, 22 with mesh placement and the remainder with a combination of fascial defect repair and mesh placement. In the evaluation performed 6 months after surgical treatment it was observed anterior defect in only 6.9% of cases (EIII =3 EIV = 2), posterior prolapse in 2.8% (EIV = 2) and apical defect in 2.8% (EIV = 2) There was complete recurrence of genital prolapse in 2 cases

Interpretation of results: Women with pelvic organ prolapse are usually multiparous, with a large number of normal births and the prolapse often occur after menopause. A large percentual reduction observed in the frequencies of prolapse stages III and IV after surgery suggests that both treatment proposed seems to be as effective for the correction of genital prolapse

Concluding message: The proper management of genital prolapse depends on the indication of the proper technique for each case, whether with or without the use of mesh.

<i>Specify source of funding or grant</i>	none
<i>Is this a clinical trial?</i>	Yes
<i>Is this study registered in a public clinical trials registry?</i>	No
<i>Is this a Randomised Controlled Trial (RCT)?</i>	No
<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>	Comite de Etica do Hospital Universitario da Universidade de Sao Paulo - CEP-HU/USP
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No