

Comparison of trans vaginal sacrospinous fixation with interposition of posterior PVDF (polyvinylidene fluoride) mesh versus native tissue reconstruction for entero-rectocele repair: Medium-term Outcome

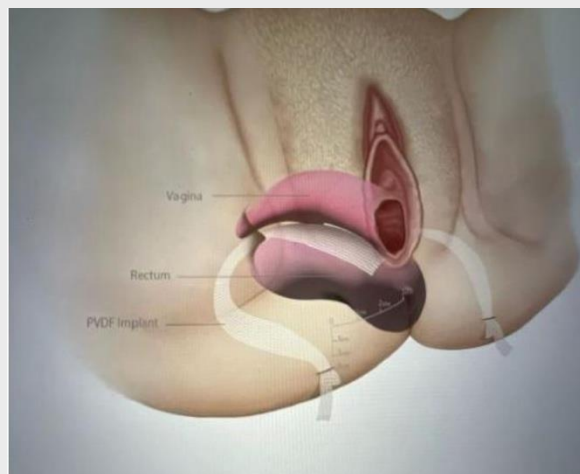
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Introduction:

- In spite of controversy in vaginal mesh procedures FDA, and NICE recommended more research on risk benefit profile of trans vaginal mesh in POP.



Methodology:

- August 2012- April 2023
- High grade entero-rectocele
- Objective outcome: POP-Q
- Subjective outcome: ICIQ-VS
- At least 2 years F/U (mean: 5 years)

Results:

- Forty-five patients (23 PVDF v/s 22 native tissue)
- ICIQ-VS improvements (86.2% in PVDF group v/s 70% native tissue group)
- POP-Q improvement (87% in PVDF group v/s 45.5% native tissue group)
- Recurrence based on POP-Q:
 - 3 in PVDF group (1 posterior compartment and 2 anterior+ apical)
 - 12 in native tissue group (5 posterior compartment and 7 apical)
- One case of vaginal mesh exposure

Conclusion:

- In comparison to native tissue, PVDF led to less post-operative morbidity and pain and achieved better mid-term anatomical results and can be used in selected cases with high risk of recurrence.