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Filindris T[1], Balaxis D[1], Charalampous S[2], Tanimanidis P[2], Taravanis T[1]
1. *Serres General Hospital, Greece,* ***2.*** *Ippokrateio,General Hospital Of Thessaloniki,Greece*

SURGICAL REPAIR OF FEMALE GENITAL PROLAPSE USING A SYNTHETIC MESH.

Hypothesis / aims of study
To assess the efficacy and safety of using a synthetic polypropylene mesh (Prolift ®) to repair female genital prolapse in two medical centres.

Study design, materials and methods
We retrospectively reviewed the records of 100 women in both centres diagnosed with genital prolapse between May 2006 and December 2009, who underwent surgical repair with implantation of a synthetic polypropylene mesh (Prolift ®). Preoperatively the women were assessed clinically with the POP-Q system and they completed the adjusted POP-Q and quality of life questionnaire.

Results
The mean patient age was 63 years (range: 41 to 80). The majority of the women (88/100) were postmenopausal. The mean number of normal deliveries was 2.3 per patient. In 32 women there was also urinary stress incontinence (USI). An anterior mesh was implanted in 72 women, a posterior mesh in 19, and an anteroposterior mesh in 9. In patients with coexistent USI a tension-free tape (TFT) was simultaneously inserted. One patient underwent transvaginal hysterectomy. Mean operation time was 37.5 min (30 to 45 min). There were no episodes of bladder or bowel perforation, or blood vessel or nerve lacerations. Blood loss was less than 150 ml. The urinary bladder catheter remained in place for 1 day, and the length of hospitalization was 2 days. Postoperative pain was managed with NSAIDs. Of the women, 31 were continent (normal Qmax and no residual urine), 3 had difficulty in urination, and 2 had dyspareunia. Vaginal erosion related to the TFT occurred in 3 patients, de novo urgency occurred in 17 patients, and there was no relapse of the cystocele. A relapse of incontinence occurred in 3 women, and 14/100 had occult incontinence which was managed at a later time. Follow up at 1 month included completion of the same questionnaire and clinical examination.

Interpretation of results
The subjective cure rate was 85/100 (85%) and the objective cure rate 97/100 (97%).

Concluding message
The use of synthetic mesh for the repair of female genital prolapse is effective and safe. A larger patient number and longer follow-up period are required to assess the long-term results and potential complications of the method.

Disclosures
Funding: No funding!!! This project was done with voluntary work of the participating medical doctors. **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Ethics Committee of Serres and Ippokrateio General Hospitals. **Helsinki:** Yes **Informed Consent:** Yes