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TREATMENT OF PELVIC ORGAN PROLAPSE WITH TENSION-FREE VAGINAL MESH. ANALYSIS OF ANATOMICAL, SUBJECTIVE AND FUNCTIONAL RESULTS.

Hypothesis / aims of study

The aim of the study is to analyze the medium-long term (with a minimum follow up of 48 months) results of the treatment of the pelvic organ prolapse (POP) with the tension-free vaginal mesh Prolift®

Study design, materials and methods

Prospective observational study of 75 women whose average age at implant is 66 years (45-85), with POP grade ≥II in any compartment, who underwent surgery with transvaginal mesh between November 2005 and December 2008 (complete mesh:70, anterior:4, posterior:1), by the same surgeon. 30 (40%) patients underwent concomitant treatment of stress incontinence.

The average follow up period was 60 months (SD 17.6) and the minimum period was 48 months. The schedule of follow up was at one month, 3 months, 6 months, one year, and then annually or under patient requirement.

Anatomical and functional evaluation was carried out. Criteria for failure of POP correction was a prolapse grade>I in any compartment (Baden and Walker scale). A functional assessment is carried out through anamnesis of urinary, defecatory, sexual and pain features, compared to the previous clinical picture. The subjective evaluation is conducted through visual analogue scale (VAS)

In the long-term follow up, we could not contact with 7 patients. A statistical analysis is carried out under SPSS 20.0, without considering the missing data.

Results

-Anatomical: correction of POP in 62/68 patients (91.2%) The failure in the treatment corresponds to the middle compartment (4 grade II and 2 grade III), anterior compartment (1 stage II) and posterior compartment (1 stage II) Painful points were observed in 4/68 patients (5.9%). None of them required further treatment.

-Functional:

Results		Previous to surgery	After surgery	Statistical significance of the modification
Urinary	Urgency	31/54(54,7%)	26/68(38,2%)	P=0,035
	Urge incontinence	19/54(35,2%)	19/68(27,9%)	P=0,391
	Daytime voiding frequency< 1 hour	5/31(16,1%)	2/65(3,1%)	P=0,021
	Nocturia>1	19/34(55,9%)	29/65(44,6%)	P=0,287
	Stress incontinence	27/54(49,1%)	17/67(25,4%)	P=0,005
	Frequent urinary tract infections(>3/year)	17/52(32,7%)	18/66(27,3%)	P=0,522
Sexual	Normal sexual intercourse	7/26(26,9%)	13/62(21%)	P=0,543
	Painful sexual intercourse	5/26(19,2%)	9/62(14,5%)	P=0,416
Defecatory	Constipation	16/53(30,2%)	24/67(35,8%)	P=0,516
Pain	Pelvic pain	9/53(17%)	9/65(13,8%)	P=0,638

-Subjective: average of VAS was 8.5/10 (SD 1.9), and the median was 9/10 (minimum of 1 -1 patient- and maximum of 10 -27 patients-)

Interpretation of results

-Anatomical:

After an average prospective follow up of 48 months, there was a low level of treatment failure (8,8%). None of the patients required further treatment for this reason.

-Functional:

Apart from constipation, all the functional variables tend to improve. This improvement was significant in the urgency, daytime voiding frequency and stress incontinence.

-Subjective:

The subjective patients perception evaluated with VAS is very good, with a median of 9/10.

Concluding message

The treatment of POP with tension-free vaginal mesh proved to be effective in medium-long term, showed signs of improvement in the majority of functional features and also returned excellent subjective results.

Disclosures

Funding: NONE Clinical Trial: No Subjects: HUMAN Ethics not Req'd: When the study started, in 2005, this was not required by the Spanish law Helsinki: Yes Informed Consent: Yes