

EVALUATION OF QUALITY OF LIFE IN WOMEN POST ABDOMINAL CERVICOSACROPEXY PERFORMED FOR PELVIC ORGAN PROLAPSE.

Hypothesis / aims of study

Pelvic organ prolapse (POP) is a major health problem that negatively affects the quality of life of many women. After a decade of common use of synthetic materials dedicated for vaginal surgical techniques in POP treatment, due to the high complication rates, the attention of surgeons has shifted to sacropexy procedures. The purpose of this study was to assess the changes in the subjective perception of quality of life in patients who underwent cervicosacropexy via laparotomy for POP correction.

Study design, materials and methods

The study group comprised 40 patients who were diagnosed with POP (POPQ IV, POPQ IIIC). All women underwent abdominal supracervical hysterectomy followed by cervicosacropexy. The cervical stump was fixated to the anterior longitudinal ligament of the spine at the level of promontorium with the use of polypropylene mesh placed in the retroperitoneal space. Each woman filled a questionnaire concerning the subjective evaluation of quality of life before as well as after the surgery (6 to 18 months post operation). It comprised questions about the general evaluation of quality of life with POP and the quality of sexual life, both rated using a 10-point analogue scale. Moreover, information on the frequency of accompanying conditions, such as stress urinary incontinence (SUI), overactive bladder (OAB) symptoms and urinary retention, was obtained. T-Test for mean in paired samples and Wilcoxon sign rank test for paired observations were used for statistical analysis.

Results

The mean age in the analyzed group was 60,87 (SD 1,36). The mean BMI was 26,75 (SD 0,54). The average number of vaginal deliveries was 2,06 (SD 0,17). 83% of women were in climacterium at the time the research was conducted, 14,3% used estrogen replacement therapy. 56,7% of the group was sexually active before the surgery.

In all patients, accurate prolapse correction was achieved. In 42% of patients, SUI occurred pre surgery. After the surgery, SUI was diagnosed in 38,24% of women ($p>0,05$).

In 50% of women, symptoms of OAB occurred pre surgery (the diagnosis based on ICS criteria: urgency, pollakisuria and nocturia in bladder diary). Post operation, these symptoms were reported by 17,65% of patients ($p<0,05$). Urinary retention was observed in 32,36% before the procedure and in 2,5% post surgery ($p<0,05$). The average subjective evaluation of the quality of sexual life before surgery was 5,75 (SD 2,52, 95% CI 4,41-7,1), post surgery: 7,93 (SD 1,77, 95% CI 6,9-8,95), $p<0,05$. The mean overall subjective assessment of quality of life in relation to pelvic organ prolapse was 2,77 (SD 2,39, 95% CI 1,87- 8,64), post operation: 9,03 (SD 1,08, 95% CI 8,66- 9,43), $p<0,001$.

Interpretation of results

The outcomes show a highly statistically significant improvement in the overall assessment of quality of life in patients who underwent abdominal cervicosacropexy for pelvic organ prolapse. The subjective change in the quality of sexual life, reduced OAB and urinary retention rates, as well as improvement of the esthetic self-perception may have contributed to this positive effect.

Concluding Message

Abdominal cervicosacropexy is an effective method for the correction of POP. It is highly acceptable and, apart from objectively curing the defect, it has a positive impact on the quality of life of the operated women.

Disclosures

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