

## SURGERY WITH MESH IN ANTERIOR AND MEDIUM PROLAPSE AND OUR RESULTS :PERIGEE VS ELEVATE ANTERIOR

### Hypothesis / aims of study

The surgical treatment of the pelvic floor pathology have developed in the last years considerably with the minimal technical like the polypropylene mesh .First, we use mesh to repair incontinence urinary and now for the defects of pelvic floor, anterior medium a posterior.

We present in this poster our experience with surgical mesh and our results of the treatment of the defects in pelvic floor anterior and medium from January 31th to August 31th,comparing the two principal technical with mesh and the result we had obtained.

### Study design, materials and methods

In our hospital we use two kinds of mesh we use in our hospital to correct cystocele or hysterocele are Perigee and Elevate anterior. Perigee have 4 attachment sites ,two nearly isquiopubic branch ,Elevate anterior, more actual is composed with fosforilcoline, similar to the vaginal membrane and have 4 insertions ,in the obturator muscle and sacrospinous. This mesh is longer than Perigee so is better the reduction of the defect.

In the period between January 31th to August 31 th ,we have correct 152 women with cystocele, hysterocele or both with de Baden test 3-4 and/or symthomatic with mesh,80 with Perigee and 72 with Elevate anterior. In the next chats we show our results analyzing complications, recurrences in the revisions al 2 and 6 months postsurgery.

In our stadistic study we used chi2 with  $p < 0.05$  with computer program SPSSV20.

### Results

We have obtain the results in the next tables :

#### Pruebas de chi-cuadrado

	Valor	gl	Sig. asintótica (bilateral)
Chi-cuadrado de Pearson	11,805 <sup>a</sup>	4	,019
Razón de verosimilitudes	16,068	4	,003
Asociación lineal por lineal	10,700	1	,001
N de casos válidos	152		

a. 8 casillas (80,0%) tienen una frecuencia esperada inferior a 5. La frecuencia mínima esperada es ,95.

#### Tabla de contingencia

			RECIDIVA		Total
			NO	SI	
MALLA	Perigee	Recuento	76	4	80
		% dentro de MALLA	95,0%	5,0%	100,0%
	Elevate	Recuento	71	1	72
		% dentro de MALLA	98,6%	1,4%	100,0%
Total		Recuento	147	5	152
		% dentro de MALLA	96,7%	3,3%	100,0%

### Interpretation of results

There are more immediately complications postsurgery and recurrences with Perigee if we compare this mesh with elevate anterior, because is a surgery less agresive than Perigee and more reproducibile with great results anatomic ,functionals and sthetics.

### Concluding message

Mesh treatment have changed in last years with new kinds of materials , models ,and surgery technical. With Elevate anterior we achieve level 1 of pelvic floor in front of perigee (level 2),and there are less complications and recurrences .Elevate anterior doesn't need incisions in the skin but is necessary to have good control to do this surgery because is more difficult .

### References

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2. Fenner DE .New surgical mesh .Clin Obstet Gynecol 2000;43:650
3. Goh JT, Dwyer PL. Effectiveness and safety of polypropylene mesh in vaginal prolapse surgery .Int Urogynecol 2001;12:S90

### Disclosures

**Funding:** AMS MESH **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** Because is a retrospective study based of the results in patients who arent included in a study,we only have used the information for this work **Helsinki:** Yes **Informed Consent:** Yes