640

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EVALUATION OF PESSARY SERVICE FOR WOMEN WITH PELVIC ORGAN PROLAPSE (POP)

Hypothesis / aims of study

To evaluate the pessary service provided for women with POP including effectiveness, patient satisfaction, and consideration of alternative treatment options.

Study design, materials and methods

Women attending nurse- or consultant-led clinics for pessary replacement were asked to complete a specific content-validated questionnaire. Face validation was conducted by a multidisciplinary group including patients, clinicians, a statistician and a quality improvement officer specialising in person-centred care. The nurse/clinician completed the evaluation by adding relevant information from the patients' hospital records. The service evaluation ran for 6 months (second half of 2014) in multicenter.

Results

104 completed questionnaires were statistically analysed. Average age was 74.4 yrs and the mean duration of pessary usage was 3.5 years (SD 3.0). The mean BMI was 28.5 (SD 7.2). 84% of women had 'discard and replace' policy and 16% had 'wash and replace' practice.

Respondents were fairly equally split between consultant-led and nurse-led clinics (53.3% and 46.7%, respectively). Women attending consultant clinics were significantly older (3.5 yrs average difference) than those attending nurse clinics (p=0.02). The majority of women (59%) had no co-morbidities reported while 11% had 1 and 30% having 2 or more comorbidities – most commonly hypertension.

Over two-thirds of women (69%) used a ring pessary with 15% using shelf and 13% Gellhorn pessaries. Women using ring pessaries were significantly younger (4.1 yrs average difference) than those using other types (p = 0.03).

Almost two-thirds of respondents rated the service as excellent with a third rating it as good. Significantly more women attending nurse-led clinics rated the service as excellent (78% vs 43%, p = 0.002). Women attending nurse-led clinics expressed significantly less anxiety (12% vs 31%, p=0.02) and less preference to see a different health professional (12% vs 25%) compared to consultant clinics. 83% of respondents used the free text comments to compliment the service.

There was a significant correlation between satisfaction with pessaries and improvement of bladder symptoms (p = 0.02). Few women (9%) found the pessary affected either walking or sex-life especially for women under 70. More women (20%) found the pessary affected toilet use, especially those using non-ring pessaries.

Self management would be considered by only 9% and a further 14% were unsure. The two main reasons given for not considering self replacement were 'not confident' and 'unable'. 43% of women stated they would consider pelvic floor exercises and 20% would consider surgery. The two main reasons for not to consider surgery were: 'old age' and 'risks of surgery'.

Interpretation of results

Generally most women are happy to continue with pessary treatment and rated the service highly. There was some evidence that women preferred being seen by nurses.

Few women would consider removing and replacing ring pessaries themselves. A common reason for reluctance was lack of confidence. 1/5 will consider surgery, these are younger and used pessary for lesser period and have fewer co-morbidities. Few women found the pessary affected either walking or sex-life but this was higher among women under 70.

Concluding message

Most patient were satisfied with the pessary service, particularly those attending nurse-led clinics for replacement of ring pessaries. Consider offering self management and/or surgery to eligible patients as an alternative to continuing pessary usage.

<u>Disclosures</u>

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