

COMPREHENSIVE EVALUATION OF SINGLE-INCISION ELEVATE SYSTEM FOR THE TREATMENT OF PELVIC ORGAN PROLAPSE

Hypothesis / aims of study

We present a comprehensive evaluation of Elevate anterior/apical and/or posterior prolapse repair system with a focus on safety and surgical efficacy.

Study design, materials and methods

Two hundred and twenty women with stage II to IV of anterior/apical prolapse and posterior prolapse were referred for Elevate mesh procedures from September 2011 through December 2014. Preoperative and postoperative assessments included pelvic examination, urodynamic study, and a personal interview about quality of life and urinary symptoms.

Results

The anatomical success rates were 92.3 % (203/220) regardless of primary or de novo POP after a follow-up of 12-38 months. The POP-Q parameters, UDI-6 and IIQ-7 scores all improved significantly after surgery. Complications included 1 case of bladder injury, 6 cases of mesh exposure, and 5 cases of urine retention that required intermittent catheterization. The mesh exposure rate of elevate system is 2.7% lower than previous secondary generation of mesh. There was no bowel injury during surgery.

Interpretation of results

The urinary frequency, stress urinary incontinence, incomplete bladder emptying and urinary hesitancy were significantly improved postoperatively. From parameters of urodynamic study, detrusor overactivity and residual urine were also significantly decreased and the volume of first desire to void was significantly increased. The recurrent rate of POP in our study was 7.7%. The recurrent cases included de novo POP and primary POP. Especially, the recurrent rate of de novo POP in the anterior compartment post only elevate posterior repairmen is high to 31.8%. Even apical support, mesh repair in only posterior vaginal compartment causes a higher de novo POP rate in anterior compartments compared with anterior alone and total mesh repair.

Concluding message

Our experience suggests that the Elevate prolapse repair System is a safe and effective procedure, creating a good anatomical restoration and significant improvements in quality of life. De novo POP in untreated vaginal compartments should be concerned in the only elevate posterior vaginal repair.

References

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Disclosures

Funding: No **Clinical Trial:** Yes **Registration Number:** Department of Obstetrics and Gynecology, Kaohsiung Medical University Hospital, Kaohsiung Medical University, Kaohsiung, Taiwan. **RCT:** Yes **Subjects:** HUMAN **Ethics Committee:** Institutional Review Board of Kaohsiung Medical University Hospital, Kaohsiung, Taiwan **Helsinki:** Yes **Informed Consent:** Yes