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MANAGEMENT OF RARE COMPLICATIONS OF TRANS-VAGINAL MESH: REPAIR OF VAGINO-CUTANEOUS FISTULA

Introduction

Surgical complications may occur in pelvic reconstruction surgery with trans-vaginal placement of reconstructive materials. Genital tract fistula is one of the less common complication of trans-vaginal mesh; therefore, clinically, urogynecologists have little opportunity to learn how to manage with it.

Design

This 57-year-old woman underwent pelvic reconstruction surgeries twice (Avaulta-P and TVT-O in 2008; Prolift-A, RSSS and P-repair in 2012) for pelvic organ prolapse. After the last operation, she complained about dyspareunia and coffee vaginal discharge. A tender point over left buttock with increasing vaginal coffee discharge developed 3 months prior to hospitalization this time. Pelvic examination revealed pus efflux from the tender point over buttock and mesh exposure from left side of posterior fornix. Fistulo-graphy confirmed vagino-cutaneous fistula and surgical intervention was arranged.

Results

This video will demonstrate how we managed with mesh induced vagino-cutaneous fistula.

Conclusion

This case demonstrated a successful experience in dealing with the troublesome vagino-cutaneous fistula. Great care should be taken to avoid to injure the rectum when dissecting and removing mesh.

Disclosures

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