

PERIOPERATIVE RESULTS AND COMPLICATIONS IN LAPAROSCOPIC SACROCOLPOPEXY: SIX YEARS EXPERIENCE

Hypothesis / aims of study

Optimal approach for pelvic organ prolapse (POP) treatment is still a controversy nowadays, especially after FDA's health alarms published in 2008, 2011 and 2016. Laparoscopic surgical correction and abdominal procedures have an increasing development, especially laparoscopic sacrocolpopexy (LS). The aim of this study is analyse perioperative results and postoperative complications in POP treatment by LS.

Study design, materials and methods

Retrospective analysis of 177 LS consecutive procedures, carried out between November 2011 and February 2017. Sample characteristics, perioperative and early complications (30 days after surgery) were analysed.

Interpretation of results

Median age wer 68 years old (SD 8.7), mean gestations 3.2. Most frequent comorbidity was hypertension 53,7%(95/177), 7,9%(14/177) had cardiovascular comorbidities and 19,2% (34/177) had previous POP surgical.

A non reabsorbible polipropilene mesh were implanted in all cases(uptift®). Sacral promontory fixation by a stitch in 97,2% cases (172/177) and by Tipless PEEK atraumatic anchor in 2,8% cases (5/177). Transfusion rate 1,7%(3/177)

Median surgical time 181 minutes, median hospital stay 3.5 days (DS 1,3) and median bladder catheter 2,4 days (DS 1,6). Simultaneous hysterectomy was performed in 11 patients.

Table 1. Syntoms asociated to POP are described.

	N	%
Urgency	88	49,7
Urgency incontinence	73	41,2
Strees incontinence	70	39,5
Mictional difficulty	52	28,8
Constipation	28	15,8
Urinary tract infection	38	21,5

La tabla 2. Intraoperative complications and 30 days after surgery complications

VARIABLE	FREQUENCY N(%)	IUGA-ICS/CLAVIEN-DINDO
Intraoperative complication		
Rectal injury	15/177 (8,4)	
Bladder injury	10/177 (5,6) 2/177 (1,1) 2/177 (1,1)	4AT1S5 5AT1S5 2AT1S2
Ureteral injury	1/177 (0,6)	5AT1S5
Bowel injury		
MAJOR POSTOPERATORY COMPLICATION		
Obstructive uropathy	7/177 (4) 1/177 (0,6)	IIIa
Vaginal erosion	1/177 (0,6)	IIIa
Bowel obstruction	1/177 (0,6)	IIIa
Subcutaneous emphysema	1/177 (0,6)	IIIa
Ureteral fistual	1/177 (0,6)	IIIb
Eventration	1/177 (0,6)	IIIb
Takotsubo syndrome	1/177 (0,6)	IIIb
MINOR POSTOPERATORY COMPLICATION		
Limb paresthesia	18/177 (10,2) 1/177 (0,6)	I
Urinary tract infection	9/177 (5)	II
Constipation	3/177 (1,7)	II
Infection/Eventration	2/177 (1,1)	II
Epileptic crisis	1/177 (0,6)	II

Concluding message

Laparoscopic sacrocolpopexy is a safety surgical approach in POP treatment with low complications rate, most of them minor.

Disclosures

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