

762

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MANAGEMENT OF COMPLETE PELVIC ORGAN PROLAPSE USING ENDOSTICH

Introduction

Vaginal prolapse occurs when the tissues and muscles in the pelvis become weak. This weakness allows the vagina, uterus, bowel or bladder to descend.

Prolapse can stay the same size or a longer period of time can become larger over time. Prolapse occurs due to weakness, damage or stretching the supporting structure at the bottom of the pelvis that hold organs in the pelvis. Prolapse can often appear in any form in women, with prolonged and difficult birth, increasing age and obesity. Other factors that can affect or weaken the pelvic muscles and surrounding tissue include constipation, chronic cough or prolonged heavy lifting.

Prolapse usually does not cause pain or constipation, but it can be uncomfortable and can affect the emptying of the bladder, intestines and affect sexual function.

Design

The paper describes the transvaginal resolution complete vaginal prolapse plus the descent of the uterus grade IV (prolapse of the anterior and apical segments) with unilateral fixation of lig. sacrospinosa using Endostich. The Endostich fixation is done by clear eye control.

Results

Conclusion

Usage of Endostich for fixation of uterus or apical compartment is convenient, reliable and safe method for transvaginal approach for pelvic prolapse organ surgery.

Disclosures

Funding: None **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** Standard operative procedure **Helsinki:** Yes **Informed Consent:** Yes