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ADHESION ILEUS DUE TO MESH OF SACROCOLPOPEXY : CASE REPORT

Hypothesis / aims of study

After the FDA issued warnings about the dangers of vaginal mesh which used to treat prolapse, many doctors change their operation method to abdominal sacrocolpopexy. However, seldom complication about sacrocolpopexy was reported. We reported a case about adhesion ileus due to mesh of sacrocolpopexy.

Study design, materials and methods

A 74-year-old woman came to emergent department due to abdominal pain for 2 days. Nausea and vomiting was also noted for one day. She underwent hysterectomy and sacrocolpopexy 15 years ago due to uterine prolapse. Abdominal computed tomography showed dilatation of a long segment of small bowel loop is found from the distal jejunum to proximal ileum. Laparoscopy showed small intestine adhered with mesh at right pelvis. Laparoscopic adhesiolysis was performed and the exposed mesh was embedded with peritonium. The patient discharged two days later.





Interpretation of results

The migration of mesh from retroperitoneal space into peritoneal cavity is the possible cause of this rare complication. Long term follow up for abdominal sacrocolpopexy is necessary.

References

1. US Food and Drug Administration, authors. Urogynecologic surgical mesh: update on the safety and effectiveness of transvaginal placement for pelvic organ prolapse. 2011. Jul, www.fda.gov/downloads/MedicalDevices/Safety/AlertsandNotices/UCM262760.pdf.

Disclosures

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