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POST-HYSTERECTOMY SACROCOLPOPEXIES: OLD METHOD NEW TECHNIQUE

Aims of Study

A variety of operations including vaginal and abdominal approaches have been described for the treatment of pelvic support defects. Sacrocolpopexy procedures are designed to restore the vagina to the anatomical and functional position in the pelvis. We describe our new experience with sacrocolpopexies in post-hysterectomy women with vaginal prolapse, using the functional rather than anatomical vaginal vault.

Methods

Retrospective analysis of 25 consecutive women who underwent sacrocolpopexy over a three year period, between 1994 and 1997. Pertinent pre and post operative data were extracted, including presenting complaints, other concomitant problems, peri-operative complications, length of hospital stay, complaints at follow up and clinical findings, especially with regards to recurrence of prolapse.

Results

21 of the 25 patients were over 50 years of age (mean age 59.3 years, range 38-74 years) and all but one had one or more children. Some form of pelvic reconstructive surgery had been performed in 17 of these women. As well as a history of vaginal prolapse 18 of the 25 women had associated urinary symptoms. There were no major peri-operative complications. A woman had bowel strangulation on the 10th postoperative day. Only eight patients were completely symptom free at six weeks follow up, most complaints being urinary in nature. Following assessment the vault was well supported in 24 women, 18 of which were deemed fit for discharge.

Conclusion

Sacrocolpopexy is an effective and relatively safe operation to correct and restore the functional anatomy of the vagina especially where preservation of sexual function is desired. Lower urinary tract dysfunction is common in patients with significant failure of pelvic supports. Careful evaluation of the lower tract is essential as urinary symptoms may become exacerbated postoperatively.