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POSTERIOR INTRAVAGINAL SLINGOPLAST AND POSTERIOR MESH REPAIR A MINIMAL ACCESS ALTERNATIVE TO VAULT PROLAPSE REPAIR.

Aims of Study

To establish the efficacy of the Posterior Intravaginal Slingoplast and Posterior Mesh Repair a Minimal access Alternative to Vault prolapse repair.

Methods

15 patients who have had either grade two or three vault proplapse were sselected . All patients had received detailed informed consent for the above procedyre. Two small incecions, 7 mm, were made midway the ischeal tuberositybetween and the rectum. The posterior vaginal wall was dissected. The Tyco IVS Tunneler, Intra vaginal sling placemnet instument, was enserted parallel to the rectum from the perneium and passed two the vaginal vault. The mesh is passed through on tehother side. The Tape Mesh is sutured to the vaginal vault. Rectum is checked to make sure that it was not perforated.

A prolene mesh, Autosuture Surgipro, is shaped the is sutured to the vainal vault and the perineal body. Vaginal closed and Mesh is adjusted. Perineal wounds are closed

All patients are given Metronidazole 500 mgs and Cefuroxime 1.5 grams iv.

Results

- No inciddence of rectal perforation.
- Total Blood Loss was 50mls on average
- Non of the patients developed pyrexia.
- 5 patients went home in 24 hours
- 9 patients went home in 48 hours
- A patient went home in the third day fro social reasons.
- No patient needed blood transfusion
- None of the patients had failures, short term results less than a year.
- Those patients who are having intercourse did not experience any difficulties nor their parteners.

Conclusions

Posterior Intravaginal Slingoplast and Posterior Mesh Repair a Minimal access Alternative to Vault prolapse repair is successful in managing vault prolpase with good outcome measures in the short Term. Further study and longer term follow up is required.