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LAPAROSCOPIC SACROCOLPOPEXY WITH MESH

Synopsis of Video

Introduction and Objective: Vaginal vault prolapse is a rare complication after hysterectomy with a prevalence of about 2%. However, it leads to severe vesical and psychological distress to the patients. Open sacrocolpopexy has a cure rate of vault prolapse in 90%. The laparoscopic approach has the potential advantages of better cosmetic results, less analgesic requirements, shorter hospital stay and quicker convalescence. In this video, we present our technique of laparoscopic sacrocolpopexy. **Methods:** With a probe in the vagina, an incision is made in the peritoneum to dissect the anterior pubopelvic fascia and the rectovaginal fascia to create enough area for placement of a prolene mesh of approximately 2 centimeters width. The next step in the procedure involves incising the posterior peritoneum to create a space to bury the mesh at the end of the surgery. The mesh is inserted in the abdominal cavity and the suture is started at the posterior aspect of the vaginal vault. The mesh is then secured to the anterior longitudinal ligament of the sacrum promontory and three sutures are used to attach the mesh to the anterior aspect of the vaginal vault. Finally, it is important to bury the mesh under the peritoneum. **Results:** Laparoscopic sacrocolpopexy is a safe and feasible surgical option to treat severe vaginal vault prolapses. **Conclusions:** Laparoscopic sacrocolpopexy is a safe and feasible surgical option to treat severe vaginal vault prolapses. The laparoscopic approach has the advantage of providing excellent vision and magnification of the organs in the pelvis allowing good dissection and manipulation of the structures.