

## **SUTURE LESS LAPAROSCOPIC PROLAPSE REPAIR WITH THE PROLIFT® SYSTEM: A POINT OF TECHNIQUE**

**Aim:** Although a horizontal positioning of the vagina theoretically prevents recurrence of prolapse, abdominal promontofixation with a mesh results in a lower recurrence rate compared to vaginal procedures without a mesh. The combination of horizontal positioning of the vagina with placement of a mesh through a vaginal incision should yield the best results but might result in a higher erosion rate. We demonstrate an almost suture less laparoscopic prolapse repair respecting the horizontal axe of the vagina without vaginal incision.

**Methods:** The vagina is dissected laproscopically. The Prolift® system is a tailored mesh (Gynaecare) fixed to the sacrospinal ligament (posterior or middle compartment prolapse) and into the obturator foramen (anterior compartment prolapse). The insertion of the needle through the obturator foramen is guided laparoscopically and through vaginal palpation. Once the needle in place a mesh-arm is pulled trough the needle-guide to fix the mesh in its position. For the placement of the mesh arm through the sacrospinal ligament a small para-anal incision is needed with blunt dissection in the ishiorectal fossa. The sacrospinal ligament is palpated and under guidance of the finger and the laparoscope the needle is passed through the ligament and a again a mesh arm is pulled trough the needle-guide. The peritoneum is closed over the mesh.

**Conclusion:** A laparoscopic prolapse repair with the Prolift® system is a feasible alternative and has the advantage compared to the promontofixation to be almost suture less and to bring the vagina in its desired horizontal position. This new approach needs prospective comparison with the promontofixation and with vaginal placement.