GENITAL FLOOR REPAIR USING POLYPROPYLENE MESHES: A COMPARATIVE STUDY

Hypothesis / aims of study

The past years, the use of polypropylene meshes for the correction of genital floor prolapse has become extremely popular throughout the world. We reviewed the results and complications of polypropylene mesh insertion for treatment of genital floor prolapse, with or without accompanying voiding dysfunction, and compared the results obtained with Gynemesh (Gynecare Ethicon) and Prolift (Gynecare Ethicon) repair systems.

Study design, materials and methods

In total, 56 women were successfully operated between May 2004 and February 2007. Mean follow-up was 21 months for group A (gynemesh) and 8 months for group B (prolift). Follow-up included pelvic examination 1,3 and 6 months post-operatively and yearly afterwards. Mean age was 65 years (group A: 66, group B: 64.8). Preoperatively, all patients were evaluated with the POP-Q system for genital floor prolapse. A quality of life questionnaire was filled before and after the operation. 33 women were subject to Gynemesh insertion. 42% (n=14) underwent vaginal hysterectomy, 19 patients had anterior-posterior repair, 12 had anterior repair and 2 had posterior repair with the concomitant use of Gynemesh. 23 women were treated with the insertion of Prolift polypropylene mesh. One vaginal hysterectomy was done, 16 total repairs, 3 anterior and 4 posterior repairs.

Results

In the gynemesh group, cure rate was estimated 90%, while 3 patients presented with stage 2 prolapse. In the prolift group, cure rate was estimated 96% with excellent objective anatomical results and subjective patient satisfaction. 2 de novo dyspareunia cases were reported. Erosion rate was 12% (n=4) for the gynemesh group and 4% (n=1) for the prolift group.

Interpretation of results

The prolift polypropylene mesh repair system showed better anatomical results. It is efficient in treating 4th stage prolapse without requiring concomitant hysterectomy, which is considered a strong and independent independent risk for mesh erosion, which accounts for the lower erosion rates.

Concluding message

Polypropylene meshes are a very effective tool for pelvic floor reconstruction surgery, with better anatomical results than traditional methods and low rate of serious complications and have become a promising field in gynecology.

References

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HUMAN SUBJECTS: This study did not need ethical approval because it was a retrospective study concerning the results of performed surgeries and includes the information and follow up done in all cases but followed the Declaration of Helsinki. Informed consent was obtained from the patients.