

## PELVIC ORGAN PROLAPSE REPAIR WITH PROLIFT TRANSVAGINAL MESH: RETROSPECTIVE STUDY OF 118 CASES.

### Hypothesis / aims of study

AIM: The aim of this study was an evaluation of safety and efficacy of surgical management of female pelvic organ prolapse (POP) with application of transvaginal synthetic meshes (Prolift, Gynecare).

### Study design, materials and methods

METHODS: The present retrospective study comprised 118 patients who underwent surgery at Urogynecology department of our Clinic between January 2005 and December 2008. All patients had a genital prolapse stage 3-4 according to POP-Q International Continence Society classification. According to each case, prosthetic interposition was total, or anterior only or posterior only. In total, forty anterior (33.9%), twelve posterior (10.1%) and sixty-six total Prolift procedures (55.9%) were performed. Patients were systematically seen within 1 month, 3 months and 12 months after surgery. Multivariate statistical analysis followed a model of logistic regression applied to each post-surgical complication.

### Results

The mean age of patients was 64.6 years. The mean follow-up period was 7 months (3-36). Eighty patients reported symptoms resolution (67.8%). Another 31 females considered their symptoms significantly improved (26.3%) after prolapse repair. Failure of mesh surgery was found in 7 patients (5.9%). All patients with prolapse recurrence had isolated anterior (6) either posterior meshes (1). Only two patients have had concomitant hysterectomy during POP repair.

In-surgery complications were three bladder wounds (2.5%), one rectal wound (0.8%), two vascular injuries (1.7%) and three hemorrhages greater than 200 mL (2.5%). Among early post-surgical complications (during the first month after surgery) were eight pelvic hematomas (6.8%), three cases of urinary retention (2.5%).

Among late post-surgical complications there were seven erosions (5.9%), two cases of persistent pelvic pain (1.7%), three UTIs (2.5%), seven de novo SUI (5.9%) and four de novo urge incontinence (3.4%).

### Interpretation of results

Management of genital prolapse with synthetic prostheses interposed through vaginal approach is safe and efficient method. It can be reproduced with a low rate of peri- and early post-surgical complications.

### Concluding message

Transvaginal Prolift Mesh technique is effective and safe method of treatment of genital prolapse with a low rate of peri- and early post-surgical complications. However further randomized clinical trials are needed to recommend this technique as the gold standard.

<i>Specify source of funding or grant</i>	NONE
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	Ethics Committee of Moscow State University of Medicine and Dentistry
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes