**ABSTRACT**

Hypothesis / aims of study: The aim of our study was to assess the effects of Uphold™ Lite Transvaginal Mesh (TVM) surgery on sexual function for the treatment of Urogenital Prolapse.

Materials and Methods: Two hundred and five women with symptomatic POP stages II to IV defined by the POP quantification (POP-Q) staging system underwent TVM procedures at our hospitals. Thirty women were included because they were sexually active and had complete follow-up. Preoperative and postoperative assessments included pelvic examination using the POP-Q system and a personal interview to evaluate sexual symptoms with the short forms of UDI-6 and IIQ-7, and the FSFI.

Result: There was a significant improvement at points Aa, Ba, C, Ap, Bp and total vaginal length (P<0.05), and the UDI-6 and IIQ-7 scores showed significant decreases in both groups postoperatively (P<0.01). The scores of all parameters of FSFI except the lubrication domain, improved significantly after Uphold mesh surgery (P<0.05).

Conclusion: Uphold mesh surgery creates an effective anatomical restoration of POP, and favorable sexual function.

**METHODS**

A prospective cohort study design was conducted in women who underwent Uphold Mesh Surgery for treatment of pelvic organ prolapse (POP).

From September 2015 through August 2017, two hundred and five women with symptomatic POP stages ranging from II to IV defined by the POP quantification (POP-Q) staging system were treated with TVM with Uphold™ Lite mesh at our hospitals by two skilled and experienced urogynecologic physicians. Thirty women were included because they were sexually active and had complete follow-up. Sexual activity was defined as having vaginal intercourse within the 6months. Preoperative and postoperative assessments included pelvic examination using the POP-Q system and a personal interview to evaluate their urinary and sexual symptoms by using the short forms of Urogenital Distress Inventory (UDI-6), Incontinence Impact Questionnaire (IIQ-7) and Female Sexual Function Index (FSFI) before and 6 months after operation.

Anatomical restoration was evaluated by pelvic examination based on POPQ system postoperatively and surgical failure was defined as the most distal portion being POP stage II or greater, regardless of a primary or a new site.

**RESULTS**

As for the POP-Q analysis, there was a significant improvement at points Aa, Ba, C, Ap, Bp and tvl (p <0.001) after operation, and a 96.7% success rate for POP correction was noted. With respect to the changes in quality of life (QoL), there were statistically significant improvement in both UDI-6 and IIQ-7 questionnaires.

We assessed Female sexual function with FSFI questionnaire, and the total score and all domains except for lubrication domain showed significant improvement.

**CONCLUSIONS**

In our study, we found that Uphold mesh surgery can achieve effective anatomical restoration of POP and better sexual function regardless of concomitant sling surgery.

**REFERENCES**


