

# Feasibility and outcomes of day case vaginal surgery

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## Aim

To review the surgical and post-operative complications of patients who had vaginal surgery in a day case setting in a district general hospital.

To consider the feasibility of day case vaginal surgery

## Methods and Materials

We analysed a data set including all who had vaginal repair surgery without hysterectomy, by a single urogynaecological surgeon in a district general hospital, over a period of 7 years.

The data included 70 women who underwent 71 procedures between December 2015 and August 2022.

Patient medical notes and a urogynaecological data base were used to gather relevant information.

Several factors were compared including type of procedure, length of stay, comorbidities, and the type of anaesthetic.

Pre and post operative ICIQ questionnaire results were also included within the data collection.

## Discussion

Over 50% of those operated were discharged on the same day, and 90% within 24 hours. This shows that vaginal surgery day cases are feasible in most patients with pelvic organ prolapse.

Those requiring overnight admission, were often operated later in the day – reducing the chance of an early discharge being appropriate.

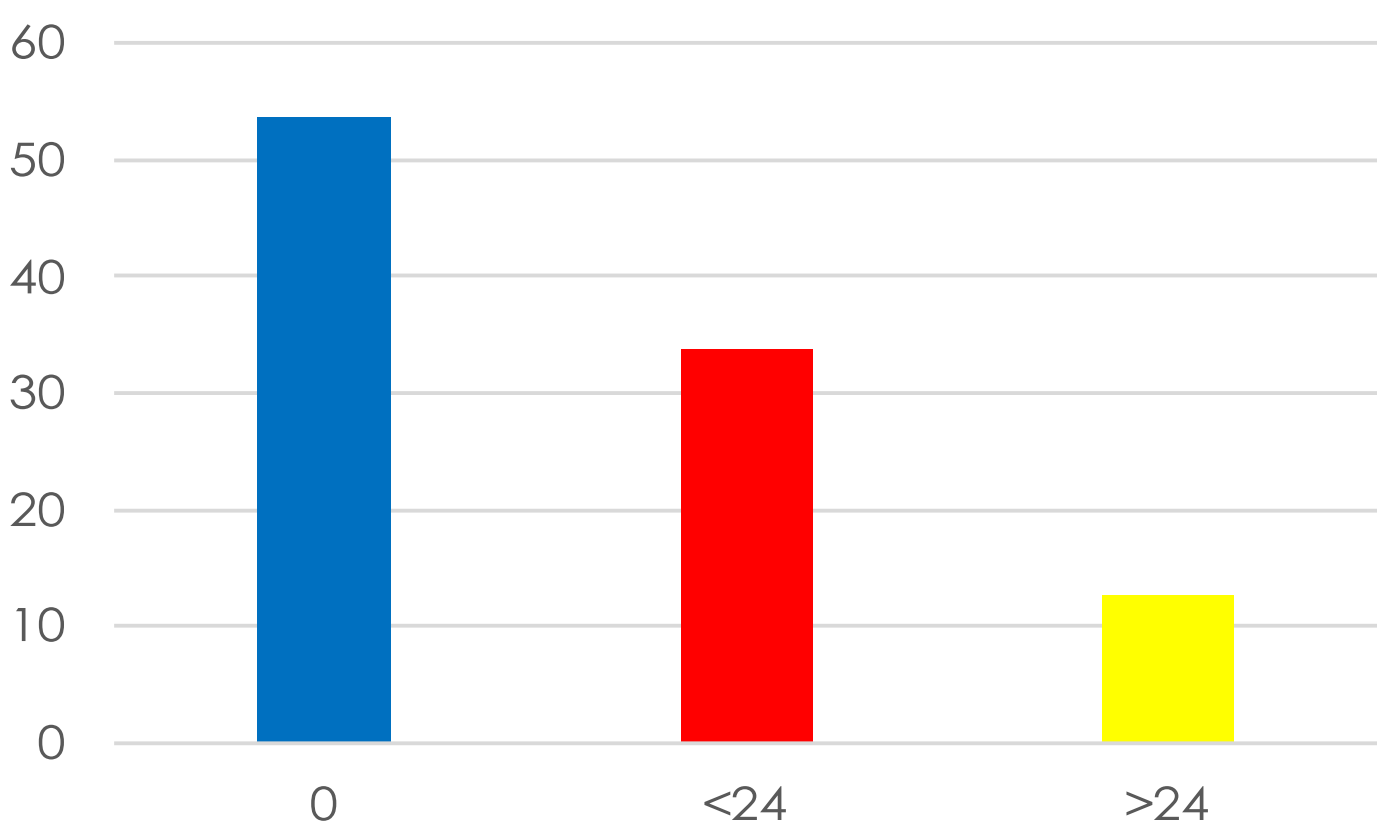
No increase was seen in post operative readmissions or return to theatre.

Day case vaginal surgery is feasible and should be offered routinely.

## Results

- 53.6% of patients were discharged the same day, with a further 33.8% within 24 hours. This was usually attributed to a later surgical slot or due to patients requiring social support.
- The surgical procedures included: anterior repair (n=46), posterior repair (n=7), recto-enterocele repair (n=15), multiple vaginal repairs (n=3)
- The median age was 63 and the median BMI 29.2.
- 23.9% of women had previously undergone a vaginal repair at another centre, whilst 35.2% had trialled a pessary in the past.
- 93% of procedures were carried out under general anaesthetic
- The median blood loss was 100 ml (range 50-350ml).
- Vaginal packs were not used after surgery.
- Majority of patients had a significant improvement in the postoperative ICIQ-VS scores, at 3 month follow up.

### Length of stay



## Conclusions

- The implementation of vaginal surgery as day case has many potential benefits.
- These include enhanced recovery, reduced risk of VTE and reduced risk of UTIs secondary to prolonged catheterisation, without an increase in readmission rate or postoperative morbidity
- It is likely to be more cost effective and a better utilisation of limited resources within the NHS.(Reduction of bed occupancy/cost of prolonged admission and social care).
- Following the Covid-19 pandemic there remains an extensive backlog of elective cases which could be reduced by day surgery.

### Procedures

