



## **ICS Consensus Document on the Diagnosis and Treatment of Mesh Complications**

### **Description of the topic: the arguments for creating the working group:**

Mesh complications are becoming a common problem that healthcare providers are facing every day in their practices around the world. Data from the UK suggests that at least 10% of patients have problems with mesh and this may be the tip of the iceberg. These complications are not always easily recognised and patients sometimes spend years going round in circles before someone diagnoses that there is a problem with the mesh and then often trying to find someone who can treat the problem is also an issue. There are many patient groups around the world advocating banning of mesh and certainly mesh has been banned or suspended in several countries around the world.

In the pelvic floor, the meshes that are used include incontinence mesh and prolapse mesh (both vaginal and abdominal). There are no long-term data on the problems that mesh can cause and even less data on the management of mesh complications and the outcomes from treating these.

The ICS is the only society in the world which deals with female and male pelvic floors with a multidisciplinary multinational representation, including health-care providers and patients. It therefore should be at the forefront of providing advice to all involved in mesh complications.

### **Scope: It is envisaged that this consensus will include:**

- The diagnostic pathway which will need to be followed for mesh complications from all types of pelvic floor mesh surgery including incontinence mesh, vaginal prolapse mesh and abdominal meshes such as sacrocolpopexy and ventral mesh rectopexy.
- Multidisciplinary team including urologists, gynecologist, radiologists, colorectal surgeons, physiotherapists, nurses, pain specialists and patients.
- The treatment options available for the different complications and who should be treating them.
- Algorithm for diagnosis and treatment of complications.
- Recommendations on reporting of mesh complications.
- Training requirements for mesh complications.

### **Timelines**

The working group should target to produce the report within 18 months, but with an absolute maximum of 3 years from commencement.

### **Chairs**

Professor Hashim Hashim & Professor Sherif Mourad