

## Transvaginal mesh op restores pelvic organ prolapse at price

26 May 2012

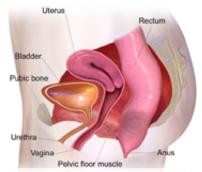


Image courtesy of Blausen Medical

Women in the total-TVM group had significantly higher preoperative scores of UDI-6 and IIQ-7, and there were significant decreases in these scores in both groups postoperatively. Following TVM surgery, the dyspareunia domain scores worsened significantly in both groups, while the lubrication domain of the FSFI deteriorated only in the total-TVM group.

"We believe that these findings may aid in counseling women with POP before surgery about potential effects on sexual function postoperatively," the authors write.

More information: <u>Abstract</u>
Full Text (subscription or payment may be required)

(HealthDay) -- Transvaginal mesh (TVM) procedures are effective for anatomical restoration of pelvic organ prolapse (POP), but patients report a worsening of sexual function following surgery, according to a study published online May 21 in *The Journal of Sexual Medicine*.

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Cheng-Yu Long, M.D., Ph.D., from the Kaohsiung Medical University in Taiwan, and colleagues compared sexual function in 70 women with symptomatic POP stages II to IV who underwent anterior (39 women) or total (31 women) TVM procedures. The women were assessed both preand postoperatively with pelvic examinations using the POP quantification staging system, a urodynamic study, and a personal interview to evaluate urinary and sexual symptoms. Short forms of the Urogenital Distress Inventory (UDI-6), and Incontinence Impact Questionnaire (IIQ-7) and the Female Sexual Function Index (FSFI) were utilized.

The researchers found that there were no significant differences in success rates for TVM and mid-urethral sling between the groups. Pelvic examinations revealed significant improvements in both groups except for in total vaginal length.



APA citation: Transvaginal mesh op restores pelvic organ prolapse at price (2012, May 26) retrieved 15 September 2022 from <a href="https://medicalxpress.com/news/2012-05-transvaginal-mesh-op-pelvic-prolapse.html">https://medicalxpress.com/news/2012-05-transvaginal-mesh-op-pelvic-prolapse.html</a>

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