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OUTCOME OF LAPAROSCOPIC SACROCOLPOPEXY WITH ANTERIOR AND POSTERIOR MESH FOR FEMALE PELVIC ORGAN PROLAPSED. A PROSPECTIVE STUDY ON 160 CASES.

Hypothesis / aims of study

Assessment of the postoperative outcome following conventional laparoscopic sacrocolpopexy using anterior and posterior mesh in female pelvic organ prolapsed.

Study design, materials and methods

This is a consecutive 4 year prospective observational study (2008-2012) in which 160 patients presented with at least a Stage 2 apical prolapse, with an anterior or a posterior vaginal wall prolapse, who underwent a double sacrocolpopexy. Two large pore size (≥ 1 mm) heavyweight (115 g/m²) monofilament of polypropylene prostheses (Aspide Group, Surgimesh Implant) were exclusively used for this technique. The prostheses were fixed on posterior and anterior face of the vagina with absorbable sutures (Vicryl 2/0) and the sacrum with permanent sutures (Mersuture 1). Pre- and post-operative data referring to international pelvic organ prolapse quantitation classification (POP-Q), scores of quality of life and sexuality (French equivalent of the Pelvic Floor Distress Inventory (PFDI), Pelvic Floor Impact Questionnaire (PFIQ) and Pelvic organ prolapse-urinary Incontinence-Sexual Questionnaire (PISQ-12)) were compared. They were contacted and completed postal questionnaires more than one year after surgery and had a follow up in our uro-gynaecology department.

Results

With a mean follow-up of 14.7 months, 154 patients were accessible for evaluation. For these patients, the anatomical success rates (Stage 0 or 1) on the apical, anterior or posterior compartments were respectively, 97%, 89% and 98%. On the functional level, all the scores of quality of life and sexuality were improved.

Interpretation of results

This study confirms the effectiveness of laparoscopic sacrocolpopexy for the repair of the all compartment prolapse. It also shows its effectiveness for the apical and anterior compartment repair when the cystocele is moderate and limited to a median defect. In our experience, laparoscopic sacrocolpopexy with heavyweight polypropylene prosthesis is an effective treatment of the posterior defect.

Disclosures

Funding: I, the undersigned do not have any existing or known future financial relationships or commercial affiliations to disclose: Signed: DEVAL Date: 27 March 2013 I, the undersigned have the following existing or known future financial relationships or commercial affiliations to disclose Signed: DEVAL Dated: 27 MARCH 2013 **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics not Req'd:** Assessment of the postoperative outcome following conventional laparoscopic sacrocolpopexy using anterior and posterior mesh in female pelvic organ prolapsed. **Helsinki:** Yes **Informed Consent:** Yes