



SEXUAL FUNCTION AFTER IMPLANTATION OF PARTIALLY ABSORBABLE TRANSVAGINAL MESHES

Huelder T (CH) [1], Lobodasch K (DE) [2], Pauli F (DE) [3], Adelhardt W (DE) [4], Hornung R (CH) [5]

Context

Transvaginal meshes are part of the armamentarium to treat pelvic organ prolapse. Due to a potential risk of de novo dyspareunia, transvaginal meshes are mainly used in postmenopausal women and in case of recurrent prolapse. Partially absorbable meshes are based on a highly flexible macroporous polypropylene of which half is being absorbed within 84 days. These meshes might impact sexual experiencing less than conventional meshes.

Objective

We hypothesized that there is no worsening of the vita sexualis after compared to prior to the implantation of a partially absorbable transvaginal mesh.

Methods

We conducted a prospective single-arm multicentre post-marketing study with intraindividual comparison.

Patients

Patients with pelvic organ prolapse stage 2 or higher (according to ICS-POPQ). To reach statistical power we aimed to include 125 patients. Due to the withdrawal of the study product from the market we stopped recruitment after inclusion of 11 patients

Interventions

Transvaginal implantation of anterior and/or posterior or total meshes was performed.

Before and 12 months after mesh implantation patients filled in the validated German version of the Female Sexual Function Index Questionnaire (FSFI-d) and the validated German version of the Australian Pelvic Floor Questionnaire (PFQ). 12 months after surgery patients were also asked about their level of satisfaction with the surgical outcome by a Visual Analog Scale (VAS), the Patient Global Impression question (PGI) and the question whether they would have done that operation again.

[1] Cantonal Hospital St. Gallen, [2] retired, [3] Augsburg Hospital, [4] Saarland University Hospital, [5] Cantonal Hospital St. Gallen

Main Outcome Measures

A paired t-test was used for statistical analysis.

Results

Postoperative FSFI-d total score shows not only non-inferiority but even superiority compared to the baseline. FSFI-d subscore pain also disproves non-inferiority and shows a tendency towards superiority. PFQ subscores (bladder, bowel, prolapse and sexuality) are all improved after 12 months. Patient satisfaction (VAS, PGI) is high and all patients who answered the question would have the operation done again.

Conclusions

Patient satisfaction with study procedure and material is high. Sexual function is better after mesh implantation than before surgery. Function of all pelvic floor compartments is improved. Implantation of transvaginal meshes does not seem to worsen sexual life. In contrary, our study implies a tendency towards improvement in sexual function after mesh-supported surgery for pelvic organ Prolapse.