

Pelvic support, pelvic symptoms and patient satisfaction after colpocleisis

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Objectives: To study the effect of colpocleisis on pelvic support, symptoms and quality of life and to report associated morbidity and postoperative satisfaction.

Methods: Women undergoing colpocleisis for treatment of pelvic organ prolapse were recruited at six centers. Baseline measures included physical examination, responses to the Pelvic Floor Distress Inventory (including the Pelvic Organ Prolapse Distress Inventory (POPDI)) and Pelvic Floor Impact Questionnaire. Three and 12 months after surgery, we assessed prolapse and continence status, and repeated baseline measures.

‘Success’ was defined as all vaginal points at one centimeter beyond the hymen or less.

Results: Of 152 patients with mean age 79 (± 6) years, 132 (87%) completed 1 year followup. Mean blood loss was 119 (± 97) mL, and mean operative time was 112 (± 51) minutes. Seventy-one (47%) patients had concomitant continence procedures. Mean hospital stay was 1.6 (± 0.7) days. Adverse events during initial hospitalization included pneumonia (1 patient), pulmonary edema (1), transfusion (2), cardiac arrhythmia (2) and hyponatremia (1). Success was 97% at 3 months and 93% at 12 months. All pelvic symptom scores and related bother significantly improved at 3 and 12 months. Mean POPDI score dropped from 113 (± 61) to 26 (± 31) 1 year after surgery, at which time 125 (95%) patients said they were either ‘very satisfied’ or ‘satisfied’ with their decision to have vaginal closure for prolapse treatment. Urinary tract infection was the most commonly reported morbidity during the year after surgery. One patient died 5 months postoperative, from medical conditions unrelated to surgery. **Conclusion:** Colpocleisis

was effective in resolving prolapse and pelvic symptoms and was associated with high patient satisfaction.