

Changes in Physical Activity after Sacrocolpopexy for Advanced Pelvic Organ Prolapse

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OBJECTIVES: The aims of this prospective study were to determine, one year after sacrocolpopexy for pelvic organ prolapse 1) the changes from baseline in the proportion of women who participated in recreational exercise and strenuous physical activities, 2) the changes in interference from either prolapse or its treatment with ability to do housework, work outside the home, or participate in exercise or recreation, and 3) factors that contribute to current perceived interference with physical activity.

METHODS: Participants completed a standardized assessment before surgery and 1 year later including validated symptom and quality of life instruments; questions related to work, household and recreational activities; and a modified Godin Leisure-Time Exercise Questionnaire. We dichotomized major effort activities based on a frequency of at least 2-3 times per month (versus less frequently). We defined substantial interference from prolapse when women reported that prolapse interfered “most/all of the time” with activity or that they were “no longer able to do these activities.”

RESULTS: Mean age of the 301 women at baseline was 62 ± 10 years (\pm SD). One year after surgery, 140 women (46%) did not change exercise level from baseline, while 107 (36%) increased and 54 (18%) decreased from pre-operative level. Sixty-six (22%) and 130 (43%) maintained their baseline frequency of doing major effort activities (heavy lifting or activities requiring strenuous effort) 2 or 3 times per month or more often and < 2 to 3 times per month, respectively. Only 33 women (11%) increased frequency of performing such activities from less than 2-3 times per month at baseline to more frequently after surgery while 72 women (24%) reduced this frequency. Of women who reported before surgery that prolapse interfered substantially with their ability to exercise, do house/yard work, or work outside the home, one year later, 84% reported no interference during any of these activities. Eight percent of women reported new onset of substantial interference with at least one of the three activities, but not more than 5% reported substantial interference with any specific activity. Most of the women who reported that their prolapse or treatment interfered with activities reported that this occurred only “some of the time”, and interfered more often during exercise/recreation and house/yard work than employment. Of the 111 women who did not work outside the home at baseline; 42% reported that they worked 1 year after surgery; whereas, of the 190 who worked at baseline, only 16% reported that they did not work at 12 months. Physician advice to restrict activities was the most frequent response accounting for perceived interference with any type of activity.

CONCLUSION: Comparing before to 1 year after sacrocolpopexy, women are more likely to increase exercise level and less likely to report perceived interference with physical activity due to prolapse or its treatment.

KEY WORDS: pelvic organ prolapse, physical activity, exercise, sacrocolpopexy