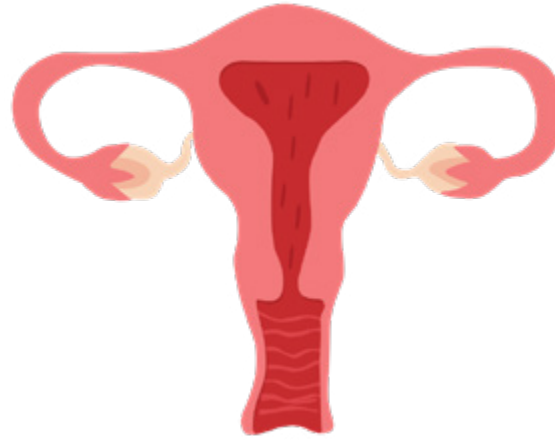


# Vaginal Prolapse



## What is vaginal prolapse?

A vaginal prolapse (also known as Pelvic Organ Prolapse) is when the ligament tissues, which help hold your pelvic organs (bladder, uterus, and rectum) in place, become torn or stretched, or if your pelvic floor muscles become weak. This can then cause your pelvic organs to bulge or sag down into the vagina.

There are three main types of vaginal prolapse.

1. **Uterine Prolapse:** In which the uterus drops down into the vagina.
2. **Cystocele prolapse:** In which the pelvic organ may bulge through the front wall of the vagina.
3. **Rectocele or enterocele prolapse:** in which the pelvic organs may bulge through the back wall of the vagina.

## What causes vaginal prolapse?

Vaginal Prolapse is common in young women who have recently given birth.

The main cause being an injury to ligaments and muscle due to

- pregnancy and childbirth.
- menopause and aging.
- constipations.
- being overweight.
- smoking.
- chronic cough.
- Inherited risks.

## What are the symptoms?

The most common symptoms include:

- A heavy sensation or dragging in the vagina.
- A lump bulges out of your vagina, which can be seen or felt.
- Pain during sexual intercourse.
- Urinary incontinence or your stream might be weak.
- Urinary tract infections.
- Problems emptying your bowel.

Your symptoms will vary depending on the type of prolapse you have.

## PLEASE NOTE:

**MOST WOMEN WILL EXPERIENCE SOME FORM OF A SYMPTOM, BUT IT CAN ALSO GO UNNOTICED UNTIL A DOCTOR OR NURSE PERFORMS A ROUTINE CERVICAL SCREENING TEST (PAP SMEAR)/EXAMINATION.**

## Preventing vaginal prolapse

You have a chance at preventing a prolapse if you keep your pelvic floor muscles strong. With the right exercises and lifestyle habits advised by a health specialist, such as a pelvic floor physiotherapist, you can help build muscle strength in your pelvic floor and minimise the risk of prolapse.

## How is vaginal prolapse diagnosed?

If you suspect you have vaginal prolapse, it is important to seek immediate medical attention. You must speak with your GP and request a referral to see a specialist.

At the specialist appointment, your doctor will ask questions about your medical history and carry out a vaginal examination to investigate the prolapse.

## Treatment options

Depending on the severity of the prolapse, your doctor may recommend either non-surgical solutions or surgical treatment.

### Non-surgical

If your doctor can treat the prolapse without surgery, they may advise you on the following:

**Practicing pelvic floor muscle training** - a program designed and planned to suit your individual needs.

**Lifestyle changes** - such as improving your diet, fluid intake, exercising, and losing weight.

**Improving bowel movements** - setting good bowel and bladder habits to avoid straining on the toilet.

**Vaginal pessary (a removable plastic or rubber device)** - measured and placed into the vagina to provide inside support for your pelvic organs.

### Surgical treatment

For more complicated cases of prolapse, you may require surgery to repair or strengthen any torn or stretched tissues or move pelvic organs back into their original place. In turn, this will help to ease your symptoms.

The most common type of vaginal prolapse surgery is reconstructive surgery. The goal of which is to restore the organs to their original positions. Reconstructive surgery can be performed in one of three ways.

1. An incision in the vagina.
2. An incision in the abdomen.
3. Laparoscopic or robotic surgery.

Depending on the type of prolapse, your symptoms, age, and general health, your doctor will advise you on the best approach.

## IMPORTANT

- **Before surgery you will ask you to sign a consent form. Please read it and ask any questions you may have. Only sign the form once you fully understand all there is to know about the procedure.**
- **Before surgery you must inform your doctor of your complete medical history.**
- **Please let Dr Kothari know if you have had an allergic reaction in the past to antibiotics, anaesthetic drugs, or other medications.**
- **Please inform your doctor if you are currently taking any medications, and if so, list them all. This also includes any over-the-counter drugs and contraceptive pills you may be taking.**

## Potential Risks

As with all procedures, laparoscopy also has some risks. While your doctor will do everything to minimise these risks, complications may occur. The following is to inform you of the general risks of surgery, including:

- Surgical risks, such as injury to nearby organs.
- Recurrence of the prolapse and symptoms.
- Unusual bladder function ranging from difficulty passing urine to incontinence.

## Next Steps

More information  
Contact our advice team on  
02 4225 1999

Diagnosis and treatment  
Contact us to book an appointment  
with Dr Kothari  
02 4225 1999

- Infection requiring antibiotic treatment.
- A small risk of bleeding.
- Temporary pain which can be managed with medication.
- A gas embolism – whereby a bubble of gas may enter the bloodstream.

## IMPORTANT

**Due to the risk that childbirth can damage prolapse repair, we advise you to delay prolapse repair until after you have completed your family.**

## Recovery after surgery

Your recovery post-surgery will depend on factors such as your age, general health, and the type of operation you undergo.

If you undergo laparoscopic surgery, you may experience some pain and discomfort in one or both of your shoulders.

You may have mild gas pains or nausea while your digestive system recovers. We advise that during this period, you eat foods that are light and easy to digest and drink plenty of water.

We also advise you to

- Walk soon after surgery to reduce the risks of blood clots and deep vein thrombosis.
- Avoid any heavy lifting, pulling, or pushing.
- Avoid vigorous exercise for at least six weeks.
- Avoid any sexual activity for three to eight weeks after surgery.
- Follow your doctor's advice on driving and returning to work.

## IMPORTANT

- **If you notice any of the following, contact your doctor immediately.**
- **Nausea or vomiting that worsens.**
- **Persistent abdominal pain that does not reduce with painkillers.**
- **Persistent vaginal bleeding that is heavier than a normal period.**
- **Persistent pain or swelling around the incisions.**
- **Fever or chills.**
- **Pain or burning when urinating.**
- **Faintness and shortness of breath.**

## Treatment costs

The costs will vary from patient to patient, depending on the level of treatment and care required. You can discuss the exact fee structure and what you can claim on Medicare and private health insurance with your doctor before undergoing any form of surgery.

Wollongong Day Surgery  
Suite 5, Level 3, 354-358 Crown Street  
Wollongong, NSW 2500

PH. 02 4225 1999  
wollongongobgy.com.au  
admin@wollongongObCy.com.au