Study Points To Risk Factors Of Mesh-Related Complications In Prolapse Surgery Patients

This retrospective multicenter study, which included 677 patients from 6 centres, aimed to evaluate intraoperative, early postoperative and mesh-related complications for surgical management of female pelvic organ prolapse (POP) with application of trocar guided transvaginal synthetic mesh.

In the course of the study the patients underwent POP surgery from 2006 to 2010. The patients were operated for symptomatic genital prolapse POP-Q stage 2 to 4. Patients were systematically seen within 1 and 3 months and then evaluated again during the study via phone interview and those who reported complaints during interview were evaluated in the office settings. Quantitative data with normal distribution were analysed via Student test; whereas Fisher exact test was used for the non-parametric criteria.

Mean age of the patients was 60 +- 12,7 years. At the time of study 586 patients from 677 were available for phone interview (86.5%). Intra-operative, early postoperative and mesh-related complications were noted in 17.3%of patients (152/677). Fifteen patients (2.2%) developed bleeding during the surgery over 500 cc; significant pelvic and vaginal hematomas were found in 37 cases (5.5%); perineal hematomas were noticed in 17 patients (2.5%).

There were two cases of urethral injuries (0.3%); 11 patients had bladder injury during surgery (1.6%); rectal damage in 5 cases (0.7%) and one case of ureteral trauma (0.2%).

Mesh related complications were limited to 32 cases of mesh erosion (4.8%), 2 cases of vaginal synechias (0.3%), one protrusion of mesh into the bladder (0.15%), two cases of vesicovaginal fistula with mesh protrusion (0.3%), 7 cases of mesh shrinkage and 16 patients complaints to dyspareunia and pain (2.4%). Pelvic abscess was found in 4 cases (0.6%).