Sacrocolpopexy

What is sacrocolpopexy?
Vaginal prolapse is a common condition causing symptoms such as a sensation of dragging or fullness in the vagina, and difficulty emptying the bowel or bladder and back ache. About 1 in 10 women need surgery for prolapse of the uterus or vagina.

The vagina is first freed from the bladder at the front and the rectum at the back. A graft made of permanent synthetic mesh is used to cover the front and the back surfaces of the vagina. The mesh is then attached to the sacrum (tail bone) as shown in the illustration. The mesh is then covered by a layer of tissue called the peritoneum that lines the abdominal cavity; this prevents the bowel from getting stuck to the mesh. Sacrocolpopexy can be performed at the same time as surgery for incontinence or vaginal repair for bladder or bowel prolapse.

How successful is this surgery?
Studies show that 80–90% of women having sacrocolpopexy are cured of their prolapse and prolapse symptoms.

Following surgery there is a small risk of prolapse developing in another part of the vagina, such as the front wall that supports the bladder. If this does develop it may require further surgery.

Are there any complications?
The most commonly reported complications for both open and laparoscopic techniques include:

- Pain (generally or during intercourse) in 2–3%
- Exposure of the mesh in the vagina in 2–3%
- Damage to bladder, bowel or ureters in 1–2%

There are also general risks associated with surgery that include wound infection, urinary tract infection, bleeding requiring a blood transfusion, deep vein thrombosis (clots) in the legs, chest infection, and heart problems. Your surgeon will discuss any additional risks that may be relevant.

What preparations are needed for surgery?
Medications like Aspirin when taken regularly affect the clotting system and may need to be stopped before surgery. Some surgeons recommend bowel preparation prior to surgery. Your doctor will instruct you if this is required. In most cases, you will be asked to avoid food and fluid for 6 hours before surgery.
What happens during surgery?
Sacrocolpopexy is performed either through an abdominal incision or ‘keyholes’ (using a laparoscope or with a surgical robot), under general anesthesia.

Recovery after the surgery
You can expect to stay in hospital between 1–3 days, depending on the surgical approach (laparoscopic or abdominal incision). During the first 6 weeks you should avoid any type of heavy housework or lifting, including shopping bags, laundry baskets, vacuuming, etc. Gentle walking is good exercise. Start with about 10 minutes a day when you feel ready and build up gradually; avoid any fitness type training, aerobics etc. for at least 6 weeks after surgery. Swimming, spa baths and intercourse should also be avoided for 6 weeks following surgery. Generally you will need 4–6 weeks off work, this period may be longer if you have a very physical job.