Vault Repair (Sacro-Colpo Pexy)

**Item Number:**

**Prolapse of the Vault of the Vagina**

 

Why is it done?

 The aim of surgery is to relieve the symptoms of vaginal bulge and/or laxity

 Improve bladder function without interfering with sexual function

 Used where own natural tissue is too weak to use

 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.

  

How is it done?

 This procedure is done under a general anaesthetic.

 Sacrocolpopexy is performed either through an abdominal incision or ‘keyholes’ (using a laparoscope or Robotic-assisted)

 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)

 The mesh is then covered by a layer of 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.

 A pelvic drain is left post-operatively

 A cystoscopy may be performed to confirm that the appearance inside the bladder is normal and that no injury to the bladder or ureters has occurred during surgery.

 A pack may be placed into the vagina and a catheter into the bladder at the end of surgery.

 If so, this is usually removed after 3-48 hours. The pack acts like a compression bandage to reduce vaginal bleeding and bruising after surgery.

 

Complications

 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:

 Wound infection,

 Urinary tract infection,

 Bleeding requiring a blood transfusion and

 Deep vein thrombosis (clots) in the legs,

 Chest infection

. 

Copyright 2019 Dr Jo Schoeman

 