

Rate of recurrent apical prolapse after high uterosacral ligament suspension.

K. Dahl Pedersen, M. Storkholm, K. Møller Bek, M. Glavind-Kristensen, S. Greisen
Department of Gynecology and Obstetrics, Aarhus University Hospital.

Objective: The primary objective of this study is to evaluate the rate of recurrent apical prolapse after operation with high uterosacral ligament suspension (HUSLS, Bob Shull). Recurrence is defined as symptomatic vaginal vault prolapse stage 2 or more (according to the International Continence Society (ICS) quantification system). Secondary the study aims to describe perioperative and postoperative adverse events associated with HUSLS.

Study design: The study is a retrospective chart review of 126 women, who underwent HUSLS for apical prolapse from January 2002 through 2009 at Aarhus University Hospital, Denmark. 122 (97%) women attended the six months follow-up. Medical charts were reviewed for an extended period after the surgery, mean chart follow-up was 7,2 years. Any new contacts due to prolapse symptoms were noted.

Results: Of the 126 women included 97 women (77%) had a hysterectomy prior to the operation and 73 (58%) had previous pelvic floor surgery. Prior to the operation 89 women (71%) had stage 2 vaginal vault/uterine prolapse, whereas 32 women (25%) had stage 3 or 4. At six months follow-up 27 (21%) women had recurrence of symptomatic vaginal vault prolapse. At the end of the study period the number was 29 (23%) women. Repeat surgery was performed in 26 women (21%).

15 women (12%) had symptomatic recurrent prolapse that did not involve the apical compartment at six months follow-up. This number increased to 23 women (18%) at the end of the study period. All of these women had repeat surgery. Totally, 49 women (39%) had repeat surgery due to prolapse within the study period.

The overall perioperative adverse event rate was 8% (10/126). Intraoperative ureteral injury rate was 2%, bladder injury 2% and 2% of the women suffered injury to the small intestine. Overall 20 women (16%) experienced postoperative adverse events, most often as urinary tract infection or urine retention, which was found in 17 women.

Conclusions: The rate of recurrent prolapse associated with HUSLS is relatively high in this cohort characterized by high number of previous pelvic organ prolapse operations and a significant degree of prolapse. However, the rate of adverse events remains low.