



Prevalence of Vaginal Erosions Caused by Pessary Use

Global Classroom Presentation: November 8, 2019

Presented by: E Grace Neustaedter (RN, MN, NCA)



Bio

Grace completed her Master of Nursing degree at the University of Calgary and Nurse Continence Advisor designation through McMaster University. Grace is the Clinical Nurse Specialist at the Pelvic Floor Clinic, a multidisciplinary clinic located in Calgary, which provides education and all aspects of care for pelvic floor dysfunction (urinary and anal control and pelvic organ prolapse issues). Their team includes about 10 nurses, 6 physicians (Urogynecologists) and some physiotherapists.

Abstract

Pelvic organ prolapse (POP) affects up to 50% of all women, resulting in a significant impact on quality of life. POP is the descent of the bladder, uterus or vaginal vault, and/or rectum into the vagina, causing pressure, bulging and discomfort. Pessaries are vaginally placed devices that support the prolapsing vaginal walls, and can also provide urinary continence. The SOGC suggests that

pessaries be considered as a first-line treatment for all women with POP and/or urinary incontinence (UI) as an alternative to surgical correction. Pessaries have a success rate of >80%, but a potential complication of long-term use are erosions from the local pressure exerted by the pessary on the tissues. This may cause satisfied pessary users to proceed to surgery. Literature cites erosion rates of 6.6% to 8.9%, but protocols to treat erosions have not been well studied. From November 1, 2016 until October 31, 2017, 279 women were recruited to be part of this research project, and they all were followed for one year after recruitment. The main research question was to determine the prevalence of erosions seen in these patients in the Pelvic Floor Clinic in Calgary, Alberta. The secondary questions were to quantify the severity of these erosions, classify potential risk factors for erosions and to note the different management methods currently used, and their efficacy. This information will serve to guide a larger, randomized, multi-center trial in Alberta with the goal of developing a standardized practice of erosion management and/or prevention, avoiding the likelihood of surgery.

Funding for this project was received from the Urology Nurses of Canada Research Grant in 2016.