

## Vaginal Pessary for Pelvic Organ Prolapse

This leaflet is written to give you information and answer some frequently asked questions about prolapse and vaginal pessaries.

You have been diagnosed with a pelvic organ prolapse.

### What is pelvic organ prolapse?

The pelvic floor muscles are a group of muscles at the base of your pelvis that run from your pubic bone at the front of your body to your spine at the back. They support the organs within your pelvis: your bladder, uterus (womb) and bowel. When these muscles are weakened or stretched prolapse can occur. Prolapse can cause a sense of bulge, discomfort, urinary and bowel problems as well as sexual difficulties.

### What causes pelvic organ prolapse?

Prolapse of the pelvic organs can be caused by things such as:

- Childbirth and pregnancy
- Ageing and the menopause
- Your lifestyle - frequent constipation, smoking and being overweight
- Exercise such as lots of heavy lifting
- Previous pelvic surgery
- Genetic predisposition

### What is a pessary?

A pessary is a removable device made of plastic or silicone that fits into your vagina to help support your prolapse. The pessary may make you feel more comfortable or alleviate your symptoms completely. You may be able to empty your bladder or bowel more efficiently. Bladder symptoms such as urgency may improve. The pessary can be used as a long-term treatment or as an interim measure prior to surgery.

### Types of pessary

Once a diagnosis of prolapse has been made your pessary will be fitted by a doctor or specialist nurse. There are many different types and sizes of pessaries available. The main ones used at the Norfolk and Norwich University NHS Foundation Trust sites are rings, rings with support, shelf pessaries, Gellhorn pessaries, donut pessaries and cube pessaries. The doctor or specialist nurse will select the size and shape which will manage your symptoms the best.

### How is the pessary fitted?

You may be asked to pass urine prior to insertion. A vaginal examination is performed to assess the prolapse and likely best size and shape pessary to use. The pessary is inserted with hormonal topical oestrogen cream as a lubricant or non- hormonal lubricating gel. After insertion we advise you to walk around, use the stairs if able and sit on the toilet and strain. It is important you are able to pass water and have a bowel motion with the pessary inside. Often several different sizes of pessary need to be trialled before the best size and fit for you is found. If you are happy with the pessary you will go home with a

follow up appointment, either by telephone or face to face. Clinics are held at the Norfolk and Norwich Hospital (NNUH) or at Cromer Hospital. The Cromer clinics run every other week on a Tuesday or Wednesday afternoon only.

**Please do not telephone Cromer hospital as the clinics are run by nurses from the NNUH.**

### **Side effects**

It is normal to have a degree of vaginal discharge with a pessary. You may have vaginal irritation. If you have passed the menopause you may find it helpful to use a preparation of oestrogen into the vagina which your GP or pharmacist can support you with, as this helps reduce the risk of discharge and rubbing of the prolapse causing ulceration. Long term use of pessaries can sometimes cause ulceration or infection. This is less likely to happen if the pessary is fitting correctly and is checked every 3-6 months. Using the vaginal oestrogens and ensuring the pessary is checked regularly helps to avoid problems with discharge, infection and ulceration. Bleeding can sometimes occur if the pessary is rubbing. It is important to report any vaginal bleeding immediately to your GP or the pessary clinic. A very rare complication of pessaries is the development of a fistula (a connection between the vagina and bladder or vagina and bowel). This is unlikely to happen if you have regular check-ups (3-6 months) and if the pessary is fitting correctly.

### **Sexual intercourse**

You are able to have sexual intercourse with a ring pessary or ring with support. Please let the nurse know if you have any worries or concerns related to this matter.

### **What happens next?**

You should be followed up every 3 to 6 months depending on your type of pessary. A comprehensive assessment is made at your subsequent appointments and removal of the pessary and a vaginal examination is performed prior to reinsertion. We aim not to cause you any discomfort but removal and insertion of the pessary can sometimes be uncomfortable.

If you have a ring pessary which is working well for you, future pessary changes can be at your local surgery if they provide this service.

If you would like to self-care for your ring pessary or supportive ring and learn to remove and fit it yourself, please discuss this with us and we can support you with this.

### **Any Question or Concerns**

If you have any questions or concerns you can telephone the pessary clinic answer phone.

**Pessary Clinic answerphone is 01603 286734.** We aim to respond to all messages left within 24 hours Monday to Friday.

**Please leave your name, hospital number, contact telephone number and a short message, and one of our pessary nurses will return your call.**

To **change** your pessary appointment please telephone **01603 287766**

**If you have an emergency out of hours please contact your GP**

