

Central Manchester University Hospitals NHS NHS Foundation Trust



Saint Mary's Hospital **Gynaecology Service – Warrell Unit**

Prolapse

Information For Patients



What is a prolapse?

Prolapse is a bulge or lump in the vagina caused by sagging of the vaginal walls and/or uterus (womb).

The pelvic bones form a ring which joins our legs to our body and protects the delicate organs inside. Inside this ring of bones is a strong sheet of muscles and connective tissues which form the pelvic floor. The bladder, vagina, womb and lower part of the bowel rest on the pelvic floor. Weakness of the pelvic floor allows the organs that rest on it to sag down with gravity or during straining (such as having the bowels opened). The bulge that forms in the vagina as things sag is called a prolapse.

Some women have some prolapse and are not bothered by it at all. For some women, their prolapse gives them a bothersome bulge that they can see or feel. Sometimes this bulge causes difficulty for them passing urine, having their bowels opened or having sex.

How common is prolapse?

Prolapse is very common. Most women who have had a baby will have small amounts of prolapse. About 10% of women (1 in 10) have prolapse that causes them bothersome symptoms.

What causes prolapse?

We do not understand yet why some women get prolapse and others do not. Some things are known to increase the risk of developing a prolapse over time. These include:

- Getting older.
- Having babies.
- Being very overweight .
- Having to strain on the toilet.
- Having very stretchy body tissues.

Having a hysterectomy for period problems can also increase the risk of developing some forms of prolapse.

When should I have treatment for prolapse?

Prolapse is not a dangerous or harmful condition. If it is not bothering you, you could decide to do nothing about it. If the prolapse is very large, we may suggest checking it is not stopping your bladder from emptying properly before you make your final decision not to have treatment. We would also suggest thinking about having your prolapse treated if it is rubbing on your underwear and getting sore or if it is stopping your bowel from emptying.

What will happen if I do not have treatment for prolapse?

As we age, our body tissues tend to sag and weaken. A slightly saggy tummy and wrinkles on our face are examples of this. Over time you may notice your prolapse is worse and causes you more bother. Some women do not notice any change.

If you decide to have no treatment now, it does not prevent you from having treatment at a later date if your prolapse starts to bother you more. There is no advantage in having treatment for a prolapse that doesn't cause any problems. It does not prevent problems happening later.

Is there anything I can do to help my prolapse?

Yes. Reducing the pressure on your pelvic floor may help, such as avoiding straining on the toilet or being overweight. Avoid activities such as high impact aerobics, running, trampolining and heavy lifting. Stopping smoking may help as it reduces the risk of chest problems (coughing is not good for your pelvic floor).

Will I need any tests?

Before your first appointment you will be asked to complete an electronic questionnaire to help us identify your troublesome symptoms. You will also be asked to fill in a bladder dairy to give us some information on how your bladder is working.

At your first appointment, the nurse will ask you for a urine sample to test for infection and other abnormalities.

Most women with prolapse will not need any other tests. However, if you are having a lot of problems with your bladder or bowels, the doctor may suggest extra bladder or bowel tests. They will explain why they have suggested the test, what it involves and give you a leaflet explaining them in more detail.

What treatments are available for prolapse?

- Physiotherapy. If you have a small prolapse or have just had a baby, your doctor may suggest a course of physiotherapy with one of our specialist physiotherapists. As everyone's pelvic floor is different, they will see you and perform an initial assessment of your muscles. After this they will be able to advise you what kind of exercises you need and how often they will need to see you. Sometimes the physiotherapist will suggest some electrical stimulation of the muscles (like an abdominal muscle toner) to help them regain their strength.
- Hormonal cream. Cream containing the hormone oestrogen can make the vagina more comfortable. You can get this with a prescription from your GP or hospital doctor.
- Vaginal Pessary. There is a large range of plastic pessaries available to support the prolapse. These are worn inside the vagina and, once in, you should not be aware they are there. They are fitted by a nurse or doctor who will advise you on the type and size of pessary that might suit you best. We usually suggest you have the pessary changed every 6 months. Some GP surgeries will change pessaries for you and some women wish to learn to change it themselves.

Pessaries are good at treating the symptoms of prolapse. 70% of women (7 in 10) who use a pessary find it successfully treats their symptoms. However, not everyone finds a pessary to suit them. The main down side of a pessary is that it needs to be changed. Sometimes the pessary can rub the vaginal walls causing bleeding or discharge. This can be treated with an appropriate cream.

- **Surgery**. If a pessary is not successful, surgery can be used to treat a prolapse. There are many different operations used to treat prolapse. Deciding which operation to have depends on may factors including:
 - The type of prolapse you have.
 - What treatments you have had in the past.
 - Any medical problems you may have.
 - Whether you might want a baby in the future.

It is not possible to list all the possible operations in this leaflet. If you decide you want an operation for your prolapse, your doctor will explain the different options open to you and give you more information about what the operations involve.

Other sources of information

www.nhs.uk/conditions/prolapse-of-the-uterus

This website, run by the NHS, includes information about prolapse.

Violence, Aggression and Harassment Control Policy

We are committed to the well-being and safety of our patients and of our staff. Please treat other patients and staff with the courtesy and respect that you expect to receive. Verbal abuse, harassment and physical violence are unacceptable and will lead to prosecutions.

Suggestions, Concerns and Complaints

If you would like to provide feedback you can:

- Ask to speak to the ward or department manager.
- Write to us: Patient Advice and Liaison Services, 1st Floor, Cobbett House, Manchester Royal Infirmary, Oxford Road, Manchester M13 9WL
- Log onto the NHS Choices website www.nhs.uk click on 'Comments'.

If you would like to discuss a concern or make a complaint:

- Ask to speak to the ward or department manager they may be able to help straight away.
- Contact our Patient Advice and Liaison Service (PALS) Tel: 0161 276 8686 e-mail: pals@cmft.nhs.uk. Ask for our information leaflet.

We welcome your feedback so we can continue to improve our services.

Please use this space to write down any questions or concerns you may have.

No Smoking Policy

The NHS has a responsibility for the nation's health.

Protect yourself, patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted within any of our hospital buildings or grounds.

The Manchester Stop Smoking Service can be contacted on Tel: (0161) 205 5998 (www.stopsmokingmanchester.co.uk).

Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

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ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

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我们的方针是,家属,亲戚和朋友不能为病人做口译。如果您需要口译员,请叫员工给您安排。







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