



Saint Mary's Managed Clinical Service  
Division of Gynaecology  
Department - Urogynaecology

## PATIENT INFORMATION LEAFLET

# SELF-MANAGEMENT OF PESSARY FOR PELVIC ORGAN PROLAPSE

## PESSARY SELF-MANAGEMENT

Pessary self-management describes women being supported to remove and insert their pessary themselves. Women who are self-managing their pessary remain under the care of the pessary clinic but can be seen less often. If women who are self-managing their pessary have a problem or concern, they can phone and ask for an earlier appointment in the same way that women who are not self-managing their pessary can.

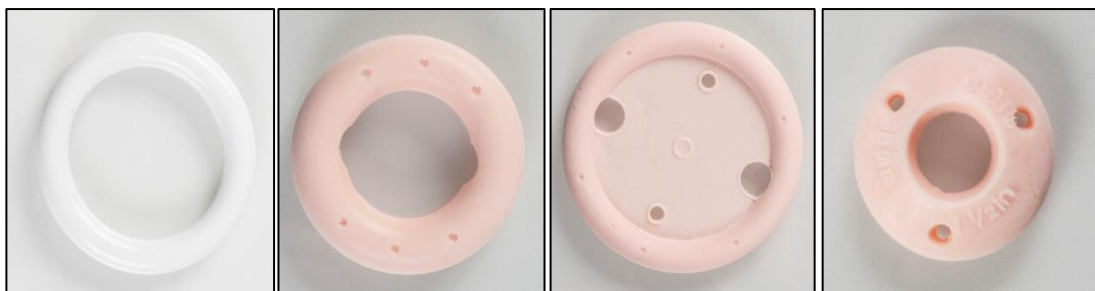
## PELVIC ORGAN PROLAPSE

Prolapse is a bulge coming into the vagina. It can occur when there is a weakness in the walls of the vagina causing the bladder, bowel or uterus (womb) to protrude. A woman may experience heaviness, dragging or a sensation of 'something coming down.' A prolapse can also cause bladder or bowel problems, such as incomplete emptying. It can also interfere with sexual activity. Prolapse can occur when the muscles, ligaments or tissues cannot support organs in the pelvis.

Risk factors include childbirth, aging, a family history or repetitive straining on the pelvis such as chronic coughing, a history of constipation, being overweight and repetitive heavy lifting.

## PESSARIES FOR PROLAPSE

A pessary is a synthetic device which can be inserted into the vagina to control prolapse. It is made of latex, silicone or vinyl. There are many types of pessaries available, however most women considering pessary self-management will have either a Ring, Ring with support or Shaatz pessary.



Vinyl  
Ring

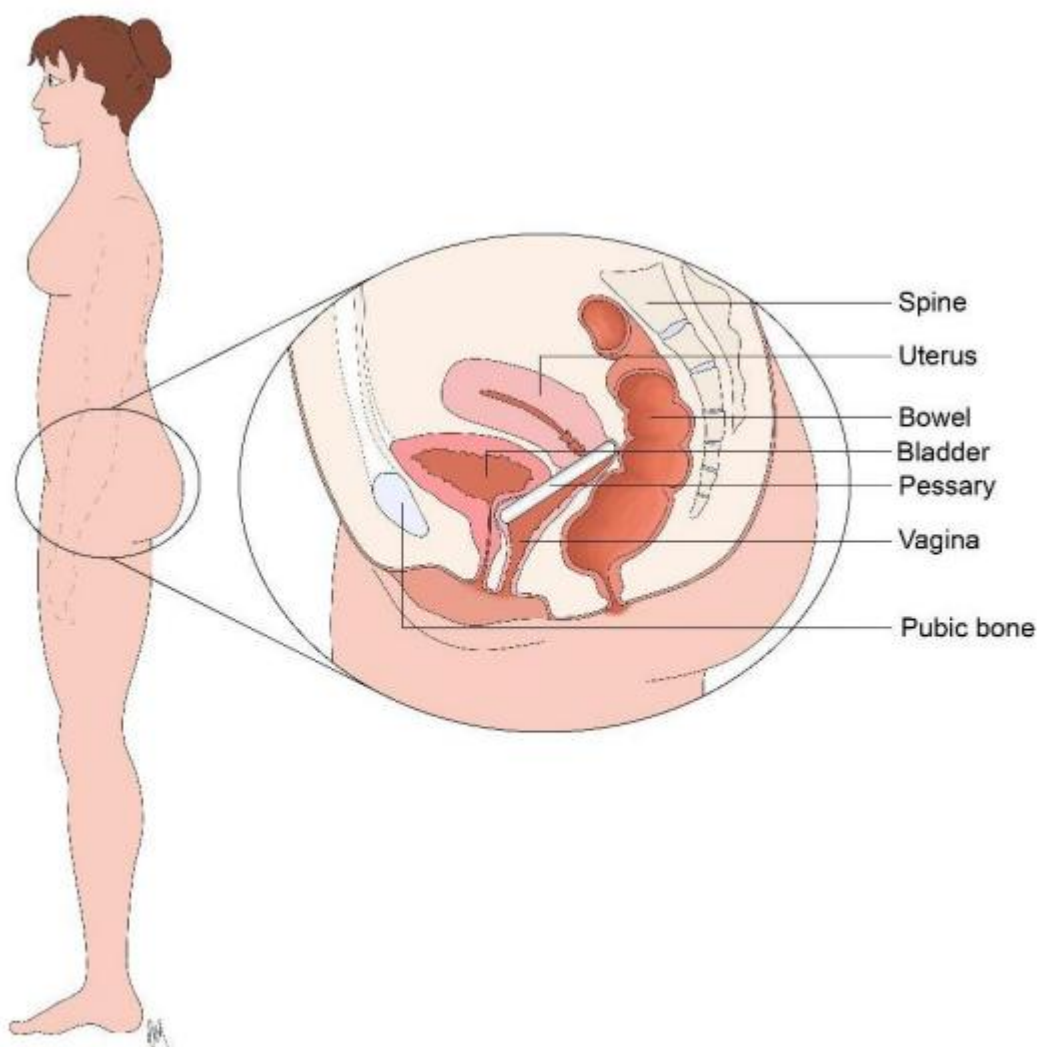
Silicone  
Ring

Ring With  
Support

Shaatz

A pessary works by providing structure and support to the pelvic organs that the pelvic floor muscles no longer can due to weakness.

The image below shows how a pessary sits inside the vaginal providing support to the pelvic organs.



*UK Clinical Guideline Group for the use of pessaries in vaginal prolapse © POGP2021*

## WHAT ARE THE BENEFITS OF PESSARY SELF-MANAGEMENT?

- Pessary self-management gives you independence in how you choose to use your pessary to suit your own lifestyle
- Pessary self-management reduces the number of scheduled appointments that you need to visit the hospital
- A research study (TOPSY) found that women who self-managed their pessary had a lower risk of pessary complications such as bleeding
- If you have a problem with your pessary, you would be able to either change the position of the pessary yourself, or remove the pessary while you wait for an appointment.

## I'M WORRIED I WON'T BE ABLE TO SELF-MANAGE MY PESSARY

Learning any new skill can be daunting but with practice self-management becomes easier and most women are able to self-manage their pessary without any issues. Some women have concerns about the strength in their hands and whether this will be a problem. If you are worried about this, silicone pessaries tend to be softer and easier to compress for insertion, so please speak to us about this as an option.

We are here to support you, both while teaching you how to self-manage your pessary and contactable by phone of further appointments if necessary. If you have any problems or concerns, please contact us via the details below and we will be happy to help.

## SUPPORT

The pessary team are here to support women using pessaries whether they are self-managing or not.

We know that some self-managing women have found it beneficial to also have support from their partner or family member. This may be just giving you support and encouragement in learning this new skill. You may also need a partner or family member to give you time and space to practice self-management without interruption or feeling rushed.

Self-management of many other conditions has become an accepted part of healthcare, and pessary self-management should be no different. Insertion and removal of a pessary is a medical procedure related to a medical device, the only difference is that it relates to an intimate part of your body.

## HOW OFTEN DO I NEED TO REMOVE MY PESSARY?

The pessary can be taken out as often as you like. Some women find they do not need to use the pessary all the time. You may wish to take it out before bedtime, or before having sex.

Otherwise, the only requirement is that you remove the pessary at least once every six months.

## HOW DO I REMOVE MY PESSARY

1. Wash your hands and find a comfortable position (you do not need to wear gloves)
2. Insert a finger inside the vagina and hook your finger over the pessary and pull
3. Some women find it easier if you cough or push down at the same time
4. You may notice some discharge or slight bleeding. This is normal.

## HOW DO I CLEAN MY PESSARY

Wash the pessary in warm water. If you wish, you can use a mild non perfumed soap.

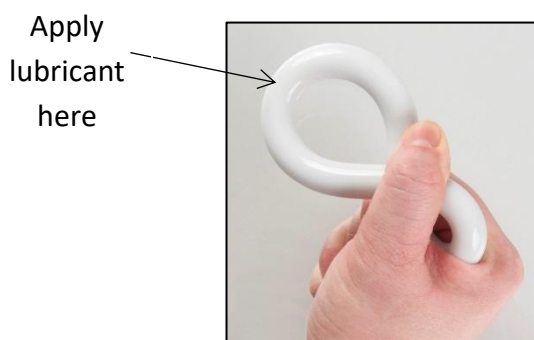
**Do not boil or sterilise the pessary or use a perfumed soap as this may damage the pessary.**

## HOW DO I STORE MY PESSARY

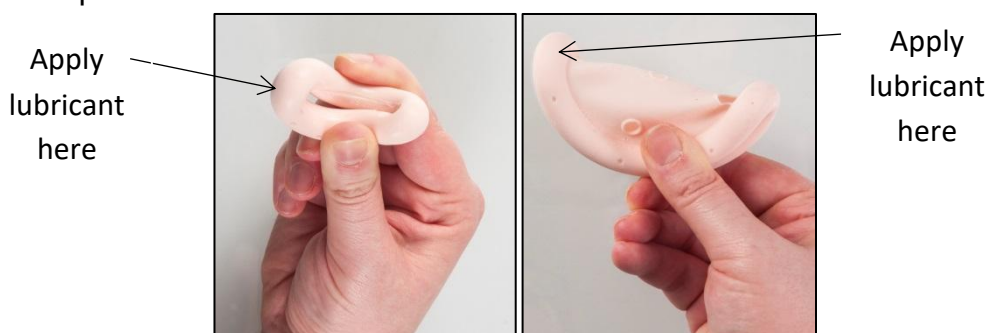
If you are not immediately putting the pessary back in, you can store it in any clean and dry container.

## HOW DO I INSERT MY PESSARY

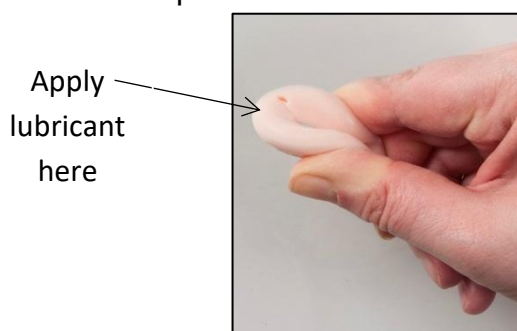
1. Wash your hands and get into a comfortable position. This can be lying down, squatting or with one foot up on a chair, stool or bed.
2. Hold the pessary in your dominant hand (your right hand if you are right handed or your left hand if you are left handed).
  - **If you have a vinyl Ring pessary (white)** twist the ring into a figure of eight as shown below



- **If you have a silicone Ring pessary with or without support (pink)** bend it in half as shown in the photo



- **If you have a Shaatz pessary (pink)** bend it in half as shown in the photo. The flat side of the pessary should face up and the curved side should face down



3. Put lubricant (for example KY jelly) on the top of the pessary, keeping it in the shape explained above (avoid putting jelly where you are holding the pessary as it may make it slippery).

4. Hold the pessary with your fingers as far away from the lubricant as you can. This will mean you can put more of the pessary inside before letting go.
5. With the other hand separate the lips of your vagina apart (the labia).
6. Put the pessary inside the vagina as far as you can, pointing towards the bottom of your back



7. Start to let the pessary unfold. If needed, push the rest of the pessary in with your other hand before you let go completely.



The pessary should sit behind the pubic bone. You might need to push the pessary up to get it into this position.

## I'M WORRIED I WON'T DO IT CORRECTLY

When the pessary is in the right place you should not be aware of it inside and the prolapse should feel supported. There is no exact position of pessaries that works for everyone, so the most important thing is that it feels comfortable for you. The pessary cannot be pushed anywhere that it shouldn't.

While working out the right size and type of pessary needs to be done by a pessary doctor or nurse, you are the expert in what feels comfortable for you. So, once we have worked out the best size and type of pessary for you, you are the best person to know how it feels most comfortable when inside.

## WHAT SHOULD I LOOK OUT FOR?

### Bleeding

A small amount of bleeding whilst changing the pessary is normal.

If you experience bleeding when you are not changing your pessary, you should contact the Warrell Unit for further advice. Contact details can be found below. Bleeding may suggest a problem that needs to be looked at therefore please do not ignore this.

## Discharge

It is quite common to experience an increase in vaginal discharge which may be yellow or green. This is caused by vaginal secretions reacting with the material the pessary is made of. If this bothers you, or if the discharge is excessive or foul smelling, please contact the Warrell Unit for further advice. Contact details can be found below.

## Bladder

Some women may experience a change in bladder symptoms with a pessary inside.

For some women a pessary may improve bladder symptoms. Correcting a prolapse may help overactive bladder symptoms such as going to the toilet very often or having to rush to the toilet, however for some people these symptoms might get worse.

Some women may experience leaking of urine when they cough, laugh or sneeze, after a pessary is inserted.

We cannot predict how your bladder will react to having a pessary to reduce your prolapse therefore if you develop bladder symptoms which bother you, please contact the please contact the Warrell Unit for further advice. Contact details can be found below. If you feel that your overall symptoms are worse with a pessary in place due to a change in your bladder symptoms, you can remove the pessary until you see or speak with your healthcare professional.

## Bowels

Most women report that their bowel symptoms stay the same or improve with a pessary in place. However, if you have difficulty opening your bowels you can remove the pessary to open your bowels and replace it after.

It is not uncommon for a pessary to fall out when you are having a bowel movement. If the pessary does fall out, wash it in warm water using a mild non perfumed soap. You can then re-insert the pessary.

We cannot predict how your bowels will react to having a pessary to reduce your prolapse therefore if you develop bowels symptoms which bother you, please contact the Warrell Unit for further advice. Contact details can be found below. If you feel that your overall symptoms are worse with a pessary in place due to a change in your bowels symptoms, you can remove the pessary until you see or speak with your healthcare professional.

## WHAT DO I DO IF I NEED A NEW PESSARY?

If you have a **vinyl pessary**, you will be given 2 additional pessaries so you can use a new one every 6 months.

If you have a **silicone pessary**, this can be used for up to 5 years before you need a new one. At your self-management support appointment we will let you know when you will need a new pessary.



**For either a vinyl or silicone pessary**, if when you are changing the pessary you notice that it is visibly damaged with cracks or no longer holds shape, please contact us and we will post a new one out to you.

## FOLLOW-UP CARE

You will be seen routinely every 18 months so that we can check that self-management is going ok for you and to perform a speculum examination to make sure the vaginal tissues are healthy. If you need to speak to or see one of the pessary care team before that, please contact us via the details below and we will arrange this.

Some women worry that if they are self-managing their pessary they might forget they have a pessary in situ or not attend their follow-up appointment. If women repeatedly do not attend a pessary clinic appointment and we cannot contact them, we automatically contact their GP to make them aware that the pessary change is overdue and ask for their assistance with this.

## WHAT DO I DO IF I HAVE A PROBLEM?

You can contact the team using the numbers found within the contact details section below.

You will need to leave an answerphone message and wait for a call back. Please state your name, date of birth, telephone number and that you are self-managing your pessary and explain what the problem is.

If you remove the pessary and cannot re-insert the pessary at home, although your prolapse may come down, no harm will come to you while you wait to speak with us.

If you cannot remove the pessary and it is causing you extreme discomfort or you are unable to pass urine, please contact us as soon as possible. If you are unable to speak with someone or are experiencing problems at a weekend, bank holiday or after 17:00, please contact the Emergency Gynaecology Unit using the number below. Please be aware that is an emergency service and if possible, it is best to wait for us to get back to you.

## CONTACT DETAILS

### Warrell Team:

*Monday to Friday 07.30-17.30 (Outside these hours please contact EGU)*



- Sister Naz Begum 0161 701 4766
- Sister Maria Miranda 0161 701 6150
- Sister Joyse Mathew 0161 701 6776
- Sister Isabella Anderson 0161 701 3281

### Emergency Gynaecology Unit (EGU)



(0161) 291 2561 (24 hours)

The EGU is located at Wythenshawe Hospital (enter via entrance 15)

## PESSARY INSERTION AND REMOVAL RECORD

**You have been fitted with a:**

**(Type).....pessary (Size)..... On \_\_/\_\_/\_\_**

**You need a new pessary in (Month and Year) ..... 20.....**

**You need a new pessary in (Month and Year) ..... 20.....**

It might be helpful to keep a record of the date you remove, clean and reinsert your pessary to make sure you have done it at least every 6 months. This is optional so only keep a record if it is helpful for you.

Pessary removed, cleaned, reinserted On \_\_/\_\_/\_\_

Pessary removed, cleaned, reinserted On \_\_/\_\_/\_\_

Pessary removed, cleaned, reinserted On \_\_/\_\_/\_\_

Pessary removed, cleaned, reinserted On \_\_/\_\_/\_\_

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Pessary removed, cleaned, reinserted On \_\_/\_\_/\_\_