

Vaginal Pessaries for Prolapse

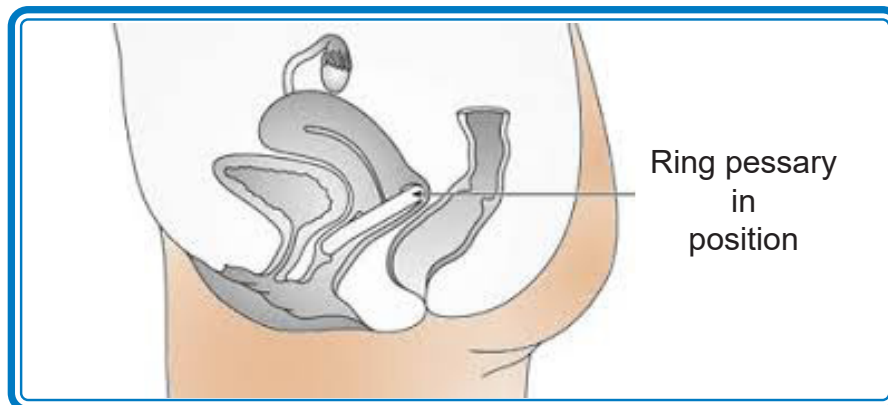
What is a pessary?

A vaginal pessary is a removable PVC or Silicone device placed into the vagina to help support areas of pelvic organ prolapse. This could involve the bladder, bowel, womb or top of the vagina.

Symptoms of a prolapse include:

- The sensation of a vaginal lump or a dragging feeling
- Constipation or difficulty emptying the rectum
- Difficulty emptying the bladder
- Problems with sexual intercourse

Treatment can be recommended when you are experiencing symptoms. Vaginal pessaries can be as successful as surgery in relieving prolapse symptoms.



The pessary sits high inside the vagina. When it is in the correct position you should not be able to feel it. After insertion you can resume all of your normal day to day activity, including sexual intercourse if a Ring pessary is used. In fact the pessary should improve your ability to be active as it supports the prolapse and should make you more comfortable. If you feel the pessary is not working well, it can easily be removed. Please continue to perform Pelvic Floor Exercises, ask if unsure what to do.

There are several types but the ones we use most commonly are Ring, Gellhorn and Shelf pessaries both of which come in a selection of sizes.

Insertion of a pessary may be a suggested treatment for patients because they:

- are unfit for major surgery
- decide not to have surgery
- need a temporary treatment whilst awaiting surgery
- when considering a future pregnancy

Fitting a pessary

After discussion with the Doctor or Specialist Nurse about the best treatment for your vaginal prolapse you may decide a pessary is suitable for you. You can change your mind at a later date if it doesn't work for you or try a different sort.

Pessaries are fitted by estimating the size required by gentle examination. Sometimes we may need to try a different size if it is uncomfortable or falls out. This is because we need to avoid putting too much pressure on the vaginal walls and causing rubbing which you may not feel. We may need to try more than one before we get the right size for you. It is quite common for a pessary to fall out especially if you are constipated and need to strain to open your bowels. Please try to support the pessary when going to the toilet by placing a hand to the vaginal entrance.

Aftercare

If the pessary falls out after you have gone away from the clinic you need to ring the hospital and ask for your Consultant's secretary who will arrange for you to come back and see us if we can fit you in for a soon appointment. Please note a pessary having fallen out is not considered an emergency and your Consultant's secretary will find you an appointment as soon as she can. If there are no soon appointments she may book you into the Weekly Pessary clinic.

If you have an acute problem (bleeding, unable to pass urine or open bowels, severe pain or offensive discharge) please speak to your GP regarding its urgency. For example, acute urinary retention needs immediate treatment. If your GP considers it non-critical then you may be seen in our Weekly Pessary Clinic. This is held on a Wednesday morning in Calderdale Outpatients. Please ring **01422 223159** to speak to the Secretary with the Diary or leave a message and she will get back to you.

What happens after fitting a pessary?

Your pessary needs changing every 4-6 months. This will be done either at the Hospital or by your GP/ Practice Nurse. Please check with your GP if they have a pessary service and inform us as we may not need to see you regularly.

If you do not receive a 6 month appointment and you are overdue a pessary change then you may be seen in the above clinic.

Self-Care

Some patients are able to learn how to remove and replace their pessary themselves, usually a ring pessary. A ring pessary can remain in situ for intimacy but some prefer to remove it. Please ask your Doctor/Nurse if you would like to learn this technique. If successful with self-care we would not need to see you as often.

Are there any side effects?

- You may experience increased vaginal discharge this is normal unless it has an unpleasant smell or colour.
- Infection – If you have an unpleasant discharge a swab will be taken and you may be given some treatment for this.
- Ulceration and/or erosion - Rarely, the pessary causes pressure areas in the vagina. The Doctor/Nurse changing the pessary may see this inside the vagina on your check-up. You will be given some oestrogen based cream and the pessary may not be replaced, if considered significant, until it has healed.
- Bleeding – this usually indicates some damage to the vaginal wall and needs to be checked out. Some minor blood spotting seen at fitting can be expected and does not need to be investigated.

If you have any comments about this leaflet or the service you have received you can contact :

Gynaecology Outpatients Manager
Calderdale Royal Hospital

Telephone No: 01422 224341

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਰੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ,
ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ میں چاہیں، تو
براہ کرم مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"