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PATIENT EXPERIENCE OF PAIN DURING VAGINAL PESSARY REMOVAL AND INSERTION: AN OBSERVATIONAL STUDY

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Introduction:

Pelvic organ prolapse is a common problem affecting women. There is currently a lack of research focusing on patient experience of pessary changes. This study aimed to capture patient experience of pessary changes and formally assess pain as a factor. We expected most women to report significant pain, with removal more painful than insertion.

Methods:

A service evaluation request was granted by our trust. Patients undergoing pessary change (ring, shelf, or Gellhorn) in gynaecology outpatient clinic over a six-month period were asked to rate their pain scores on a numerical-pain-rating-scale (NPRS-11). Other associated data was collected. Statistical analysis of results included paired t-tests, ANOVA, Tukey's tests, and linear regression analyses.

Results:

Out of 213 women, 58.2% reported pessary removal was more painful, 30.5% reported equal pain, and 10.8% reported insertion was more painful. Pain scores were significantly higher for removal than insertion (4.4 versus 2.6, $p<0.05$). Ring pessaries were significantly less painful to both remove and insert than Gellhorn pessaries ($p<0.05$). There was no significant relationship between pessary size and pain of removal or insertion in ring, shelf, or Gellhorn pessary users. There was no significant difference in pain scores reported by those with or without diagnosed vulval skin conditions.

Conclusions:

Pessary removal causes most women moderate pain, which should be communicated to patients beforehand. Ring pessaries are less painful to change than other pessary types. Clinicians should consider pain as a factor in their decision-making surrounding pessary choice and when counselling patients for self-management of pessaries, which often require more frequent changes. Further studies focused on patient experience of pessaries, particularly pessary changes, are recommended.