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ARE WE MANAGING PESSARY COMPLICATIONS APPROPRIATELY?

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Introduction

Pessaries are intravaginal devices to support pelvic organ prolapse. They are chosen by women who have trialled lifestyle modifications and pelvic floor muscle training and wish to avoid surgery (1). However, there is a paucity of data surrounding their complications (2). We aimed to demonstrate complication rates, assess their management in accordance with the UKCS consensus guidelines (3) and association with topical oestrogen use.

Methods

This was a retrospective review at two hospitals of patients coded for pessary insertion between 01/01/2021-31/12/2021. Rates of increased discharge, discomfort requiring pessary change/removal, vaginal excoriations/ulceration or bleeding or severe complications such as pessary impaction requiring anaesthetic for removal were recorded. Management was compared to UK consensus guidelines for the management of pessary complications.

Results

A total of 205 patients were identified across two hospitals: 80% of hospital 1 and 13% of hospital 2 used topical oestrogen. The overall complication rate for hospital 1 was 46% and for hospital 2 was 75% of which almost 10% were severe complications.

Complication	Hospital 1 (N=110)			Hospital 2 (N=95)		
	n	Oestrogen use (Yes)	Appropriate management	n	Oestrogen use (Yes)	Appropriate management
Discomfort	6(6%)	3(50%)	4(67%)	11(12%)	0	10(90%)
Discharge	3(3%)	2(67%)	3(100%)	0	3(3%)	0
Excoriation	32(29%)	23(72%)	31(97%)	5(16%)	30(32%)	1(3%)
Bleeding	4(4%)	4(100%)	4(100%)	0	17(18%)	1(6%)
Severe complication (incarcerated pessary or cancer)	1(1%)	1(100%)	1(100%)	0	15(88%)	2(12%)
	1(11%)	5(56%)		9(9%)	0	

Conclusion

This data lend towards validating the UKCS consensus guidelines on POP management, demonstrating that when complications are managed as recommended then their recurrence is reduced, supporting standardising practice in hospital 2. Topical oestrogen likely plays a role in reducing the incidence of pessary related complications, in particular severe complications.