

Patient Information

Pelvic Floor Repair Operation

This leaflet gives you relevant information regarding the operation. If you feel that your queries have not been answered by this leaflet, please do not hesitate to ask a member of the staff when you come in.

Please make sure that you inform the staff about any allergies or any medical conditions you have.

A repair operation is performed when you are suffering from some form of vaginal wall prolapse with or without prolapse of the womb. A cut is made in the vagina and the pelvic floor muscles are tightened.

Complications: -

A repair operation is usually straightforward with a low chance of complications. However, any operations may be associated with complication which could be an unexpected reaction to the anaesthetic, excessive bleeding or developing a blood clot, usually in a vein in the leg (deep vein thrombosis, DVT) or rarely in the lungs (pulmonary embolism). The complications specific to repair operations include - Injury to womb, bowel, bladder or blood vessel. The injury may, very rarely, have to be repaired through a cut on the tummy. Painful intercourse may be a complication after the operation.

What to expect after the operation: -

- You will have intravenous fluids until you can drink.
- You will have a catheter to empty your bladder – this may remain 24hrs or longer.
- Usually, you will have a pack in the vagina to put pressure at the site of operation for about 24 hours to stop any bleeding from the site.
- You will have a daily injection to try and prevent any blood clots.

You will be given medication for pain relief.

It is not unusual not to open your bowels for a couple of days after the operation. If it is causing discomfort you will be given medication to help you.

When the catheter is removed it is very important that you pass urine regularly. If you are unable to empty your bladder properly you may have to go home with the catheter. This is very rare.

Advice after operation: -

You will feel tired when you go home – take it easy. Gradually build up your daily activities. Listen to your body.

Avoid any heavy lifting as this puts pressure on the repair and may weaken it.

You may have some vaginal bleeding or discharge for 10 -14 days.

To avoid constipation, have plenty of fibre in your diet and drink plenty of water.

Avoid intercourse for about 6 weeks.

Avoid driving until you feel that you can do an emergency stop without any pain.

Return to work and normal daily activity varies from 6-12 weeks – depending on the type of your work.

Always remember to do pelvic floor exercise through out your life.

You may receive an appointment to be seen in the gynaecology out patient department in 6-12 weeks.

Please contact your doctor if you have the following symptoms: -

- Heavy vaginal bleeding
- Offensive vaginal discharge
- Severe pain in the vagina or abdomen
- Diarrhoea or vomiting
- Any difficulty in passing urine.
- High temperature

Prolapse can recur in 15-20% cases. The risk of recurrence is higher if you are over weight, if you suffer from chronic cough (usually caused by smoking), constipation or involved with regular weight bearing jobs.

Royal Gwent Hospital, Ward B7 West: - Tel. No: - 01633 - 234579

Royal Gwent Hospital, Ward B 7 East: - Tel. No: - 01633 - 238722

Ysbyty Ystrad Fawr: - Tel. No: - 01443 – 802553

(This is manned until 1pm Mon-Fri)

Nevill Hall Hospital, Ward 3/2: -

Tel. No: - 01873 - 732410 / 01873 – 732411

This document is available in Welsh /

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