

ANTERIOR AND/OR POSTERIOR VAGINAL REPAIR

PATIENT DISCHARGE INFORMATION

ABOUT THE PROCEDURE:

- Pelvic organ prolapse occurs when the supporting tissues that hold the internal pelvic organs in their correct positions become weakened. This allows one or more of the organs to drop or “prolapse” into the vagina.
- An Anterior Vaginal Repair is an operation performed to correct prolapse of the bladder through the front wall of the vagina.
- A Posterior Vaginal Repair is an operation performed to correct prolapse of the bowels through the back wall of the vagina.
- Both repairs involve the strengthening of the supporting tissues of the vaginal wall with absorbable sutures. An incision is made through the vagina over the prolapse. The weakened support tissue is repaired and then the incision is closed.
- A catheter will be inserted into the bladder and a material pack will be placed in the vagina to prevent bleeding and bruising after surgery. They are generally both removed the morning after surgery.

FOLLOWING THE PROCEDURE:

It is Normal to Expect:

- To stay in hospital between 2 and 4 days. You can go home once you are feeling well and your bowel and bladder are functioning.
- Mild nausea related to the anaesthetic.
- Fatigue and muscle pain related to the anaesthetic. Some vaginal discharge for 4 to 6 weeks. This should be light bleeding or spotting only and this may vary during that period of time as healing occurs and your stitches dissolve.
- To be able to return to non-physical employment at 4 to 8 weeks post-surgery. You will discuss this with the specialist at your follow up appointment.

MANAGING PAIN POST OPERATIVELY:

- It is recommended that you use Panadol/Panadeine and/or Ibuprofen as prescribed or directed.
- In addition to the above medications, you will be discharged home from hospital with stronger pain relief. Please take as directed by your specialist or the hospital staff.

HYGIENE:

- Shower as normal. Do not swim in pools, use baths or spas until your post-operative appointment.
- Sanitary pads/liners should be used and changed regularly. Do not use tampons.
- Abstain from sexual intercourse and do not insert anything in the vagina until your review appointment.

BLADDER AND BOWEL FUNCTION:

- Drink 6-8 glasses of fluid each day and
- Eat a high fibre diet that includes fruit and vegetables.
- Ensure your bowels are regular. Please avoid constipation. If you are taking pain relievers that contain narcotic (eg. Panadeine or Endone) you may become constipated. You can take bowel medications such as Movicol or Lactulose if needed. You can buy these from the chemist without a prescription.

PHYSICAL ACTIVITY:

- You must rest and allow healing after surgery.
- You will be seen by a physiotherapist during your hospital stay to revise your post-operative activity.
- Do not drive until six weeks post-surgery, unless you are advised otherwise.
- Do not lift anything heavy for six weeks. This includes shopping bags, washing baskets, children and anything more than 2kgs.
- Do not play sport, exercise or do heavy housework for six weeks.
- Do walk regularly. Start gently and gradually increase your speed and distance.

PHYSIOTHERAPY:

- Continue to wear your white compression (anti-embolism) stockings until you are fully active.
- Reintroduce your pelvic floor exercises from day two post-surgery as comfortable.

IF YOU HAVE ANY OF THE FOLLOWING PROBLEMS:

- Pain continues or worsens and is not eased by mild pain relief medication.
- Your wound discharge is bright blood or contains clots.
- Your wound is red and swollen or your wound discharge is offensive.
- Your vaginal discharge is offensive.
- You have problems voiding, eg. pain or burning on passing urine, the need to pass it frequently, or increasing difficulty emptying the bladder.
- Nausea/vomiting that does not settle.
- You have a fever or chills.
- You have calf pain, tenderness or swelling; any shortness of breath or chest pain.
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Please seek immediate help as follows:

1. During office hours of 9am to 5pm Monday to Thursday and 9am to 4pm Fridays, contact Care Gynaecology: Phone (02) 6058 6188 and dial 2 to speak to the Practice Nurse.
2. Contact the hospital you attended for your surgery:
Albury Wodonga Private Hospital: Phone (02) 6041 1411
3. Contact your normal GP or
4. If you have further concerns, present to the Albury Wodonga Health (Wodonga Hospital) Accident and Emergency Department.

Note: Albury Wodonga Health (Albury Hospital) Accident and Emergency Department does not have gynaecology services.

POST OPERATIVE FOLLOW UP:

- You will receive a follow up phone call from our Practice Nurse approximately seven days following your procedure to check on your progress and discuss your pathology results (if applicable).
- You will have a post-operative appointment with your specialist to check on your recovery at **two weeks** post-surgery if you have had both an anterior and posterior repair. Otherwise your post-operative appointment will be at six weeks post-surgery.