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“APOGEE” OR “PROLIFT” PROCEDURES FOR VAGINAL VAULT OR UTERINE PROLAPSE

What is an “Apogee” or “Prolift”?

These are specialised sling procedures used to fix the top of the vagina into its correct anatomical position. Prolene mesh is used to provide additional firm and long lasting support. The sling is attached to the top of the vagina or cervix and supporting tissues of the pelvic floor. It is used to treat prolapse where the top of the vagina or the womb itself moves downwards and appears on the outside (“vault” or “uterine” prolapse). The mesh is used to try and provide long-lasting support and to reduce the possibility of failure of the repair in the future. The terms “Apogee” and “Prolift” refer to the brand names of the manufacturers’ mesh kits. You are not aware of the mesh after the operation – it remains completely hidden. These procedures also mean that a hysterectomy does NOT always have to be performed.

What is involved?

The procedure is performed usually under a light general anaesthetic. There is an incision into the back (posterior) wall of the vagina and 2 small incisions by the side of the anus. The defect in the vaginal support is identified and the mesh is sutured to healthy vaginal support tissues to create a special bridge to fix the vagina/prolapse into its correct anatomical position.

Complications:

There is a small chance of mesh rejection after the operation. This is usually in the form of a small piece of mesh coming out of the wound requiring trimming. In very exceptional circumstances the mesh has to be removed if it is completely rejected. Other complications that are rare may include bleeding, infection or bowel perforation. Anaesthesia itself is never without risks and the risks are greater for women who smoke and are overweight.

Hospitalisation:

This procedure usually involves 1 or 2 nights in hospital.

Results:

The success rate of this procedure is good and continues to be evaluated. It is certainly similar to conventional major surgery. Weight loss if overweight, reducing or quitting smoking, improving pelvic muscle tone by doing exercises will help to ensure the operation is a success. These types of mesh repair were developed because the older, more standard vault prolapse repairs with mesh (called a “sacrocolpopexy”) involve major surgery through a cut on the tummy with relatively long hospital stays. We expect the results of the new repair to be at least as good and durable as the major surgery. While mesh repair continues to be evaluated it is certainly starting to appear better than a standard repair without mesh and currently can be described as the best, most durable option we have in our current state of knowledge.

Website: <http://www.malcolmfrazer.com.au>



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Recovery:

When you go home you must not lift heavy objects or do strenuous work for a period of **6 weeks**. Intercourse must also be abstained from for this period of time. 5 days of antibiotics have to be taken to prevent infection of the mesh.

Afterwards:

You will be seen 6 weeks after the operation and if everything is well the success of your operation should be permanent.

Post Operative Instructions:

The stitches around the anus are dissolving and will fall off in 4 to 7 days post operatively. You will have 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.

Pain should be relieved with Panadol or Panadeine (remember if you take Panadeine, this increases the risk of constipation so ensure you have an adequate intake of fibre and fluids in your diet).

Do not use tampons, pads are better.

Do not drive an automatic car for:	1 week*
Do not drive a manual car for:	2 weeks*
Do not make a bed for:	2 weeks
Do not hang out washing for:	4 weeks
Do not use Vaginal Oestrogens for:	4 weeks
Do not stretch upward for:	6 weeks
Do not do any lifting for:	6 weeks
Do not have sexual intercourse for:	6 weeks

- **It is important to check with your insurance company, re driving your car as each company has different policies on driving and surgery.**

The guidelines are minimum time before recommencing these activities. Remember to rest, if you are tired and uncomfortable you have been doing too much and need to slow down.

Remember when emptying your bladder, sit on the toilet, feet flat and lean forwards. Drink 6 – 8 glasses of fluid per day; limit your caffeinated drinks to 3 per day.