

PROLAPSE

What you should know



About one in four women develop prolapse – but it's a little discussed health issue. Sarah Marinos asks the experts to give us the facts

THE EXPERTS



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Sue Croft, physiotherapist specialising in pelvic floor care.

It's one of the few remaining health taboos – a topic most women find too embarrassing to discuss, even with their doctor.

But developing a prolapse is a common health problem and it can be managed with the right treatment.

Prolapse happens when the muscles, ligaments and tissues holding the pelvic organs in place become weak and stretched, explains Dr Caroline Gargett.

"So the pelvic organs – the bladder, bowel or

uterus – then slip out of place and down into the vagina. In some cases the organs bulge out of the opening of the vagina."

"Women who suspect they may have prolapse need to be courageous and talk about it," says Dr Salwan Al-Salihi.

"They can think it is just part of growing older, but symptoms shouldn't be ignored because they have an impact on quality of life."

So what do the experts think you should know about prolapse?

Prolapse causes damage

There are three major support structures of the pelvic organs – the ligaments holding the uterus in place, the fibro-muscular tissue that keeps the vaginal wall strong, and pelvic floor muscles underneath the pelvic organs that are the last line of defence. These can get overstretched and tear and nerves that supply the muscles can be damaged. A muscle that doesn't have a nerve attached to it will die and no longer function.

– Dr Caroline Gargett

Painful sex could be a sign

You may have prolapse if you feel a lump protruding through the vagina or you have a feeling of heaviness or a dragging sensation between your legs. You may also have difficulty fitting

a tampon and sex can be painful. You may also have difficulty emptying your bladder or bowel and that means more straining, which increases the prolapse.

– Dr Salwan Al-Salihi

Age, obesity, smoking and asthma increase the risk, too

Our tissues get weaker as we age – and this becomes more apparent in the pelvic area where tissues have to support our abdominal contents and pelvic organs. Obesity is also a contributor to prolapse because it places extra force on the abdominal and pelvic areas. People with asthma or those who smoke and do a lot of chronic coughing also put a lot of pressure on the pelvic floor and increase the chances of prolapse.

– Dr Caroline Gargett

Brace and engage...

To reduce the risk of prolapse, engage your pelvic floor muscles before you cough and sneeze. Bracing the muscles stops the force and pressure coming downwards to the pelvis and vagina. When you are lifting a heavy object, engage the pelvic floor muscles to stop the downward force, too.

– Sue Croft

There are simple solutions

A vaginal pessary can reduce symptoms – it won't eliminate the problem but it will help manage it while you go about your daily life. The pessary is a flexible ring placed inside the vagina that pushes up the prolapse and supports the uterus. It makes emptying the bladder easier and lessens the dragging sensation.

– Dr Martin Ritossa

Sometimes surgery is the only way

A procedure known as 'native tissue repair' puts torn and damaged pelvic floor muscles together again as they were prior to injury or childbirth, and is also used to repair damage to the back wall of the vagina. The most challenging procedure is needed if the damage is in the front area, affecting the bladder, and up to a third of patients may need another procedure in the future.

– Dr Salwan Al-Salihi



YOU CAN OVERDO PELVIC FLOOR EXERCISES

Pelvic floor muscle training can help but I see people who do hundreds of sit-ups every day and those muscles are tight all the time. A good pelvic floor needs to be able to tighten and relax. Also, some exercises put force downwards towards the vagina and that can lead to prolapse.

– Sue Croft

Don't forget...

To try and prevent prolapse, avoid smoking and heavy lifting, and treat anything that causes a chronic cough, such as asthma. Maintain a normal weight and eat a balanced diet to avoid constipation – so have plenty of fibre-rich foods and fluids. If you've already had prolapse, avoid exercises like stomach crunches that cause abdominal pressure, but speak to a GP or specialist to see what treatment is available to help you manage the condition.

– Dr Martin Ritossa

Having a baby is a key cause

Vaginal birth is the main cause of prolapse and most of the damage occurs with the first child – everything is already stretched by the time you have another child, but it does get a little worse each time. Certain birth events predispose you to prolapse, such as a forceps delivery, an episiotomy or cut, a long second stage of delivery and a large birth-weight baby. The age of first delivery seems to have something to do with it too – symptoms are worse in older women having a first baby.



– Dr Caroline Gargett