



## Bladder and Bowel Community

### Factsheet: Prolapse

Prolapse is a condition in which one or more of the pelvic organs comes down or bulges into or out of the vagina, often with the sensation of 'something coming down below'. The pelvic organs consist of the uterus, bowel and bladder. Pelvic organ prolapse occurs when the network of supporting tissues that holds these organs in their correct positions become weakened.

Symptoms include:

- A heavy dragging feeling in the vagina or lower back.
- Feeling of a lump in the vagina or outside the vagina.
- Urinary problems such as slow stream, a feeling of incomplete bladder emptying, frequency, urgency and stress urinary incontinence.
- Bowel problems such as difficulty moving the bowel or a feeling of not emptying properly.
- Discomfort during sexual intercourse.

### What causes pelvic organs to prolapse?

Pelvic organs can start to prolapse due to damage of the ligaments and muscles which support the pelvic organs. Damage can arise from:

- Pregnancy and childbirth which are considered major factors.
- Menopause.
- Conditions that cause excessive pressure on the pelvic floor like obesity, persistent coughing, heavy lifting and chronic constipation.
- It may also occur as a result of other medical conditions that can damage the muscles, nerves and ligaments in the pelvis. In rare cases, an abdominal or pelvic mass or tumour can cause a prolapse or make a prolapse worse.

### Where can a prolapse occur?

A prolapse may occur on the front wall of the vagina, back wall of the vagina, the uterus or top of the vagina.

#### *Prolapse of the front wall of the vagina*

This is the most common type of prolapse and involves the bladder and /or urethra bulging into the vagina.

#### *Prolapse of the back wall of the vagina*

This is when the lower part of the large bowel bulges into the back wall of the vagina and/or part of the small intestine bulges into the upper part of the back wall of the vagina.

### *Uterine prolapse*

This occurs when the uterus (womb) drops or herniates into the vagina. This is the second most common form of prolapse.

### *Vaginal vault prolapse*

Following a hysterectomy, the top of the vagina may collapse downwards, towards or out of the vagina.

## **How can pelvic organ prolapse be treated?**

Treatment options can be categorised into non-surgical and surgical options.

### *Non-surgical options*

- Prolapse is rarely a life threatening condition and many women will choose not to have any treatment if they have no symptoms or discomfort.
- Pessaries are vaginal devices that come in various shapes and sizes. Pessaries help by providing mechanical support to the prolapsed organs which relieves the symptoms.
- Pelvic floor exercises strengthen the weakened pelvic floor muscles which will improve or prevent worsening of the prolapse. See below for more information.

### *Surgical options*

A surgical repair may be offered to women with symptomatic prolapse. The type of treatment recommended will depend on a number of factors including age, previous surgical history, the severity of the prolapse and general health.

There are two main surgical options; reconstructive surgery and vaginal closure surgery.

- The purpose of pelvic reconstructive surgery is to restore the pelvic organs to their natural position while retaining sexual function. There are many different ways to accomplish the surgery; vaginal approach, abdominal approach, laparoscopic and robotic. Approximately 75% of women who choose vaginal surgery and 90-95% who choose the abdominal approach will have a long term cure of their prolapse symptoms.
- Vaginal closure surgery is performed only if the prolapse is severe and the woman is not sexually active, or if she is medically unfit for reconstructive surgery. During this procedure the surgeon will stitch the vaginal walls together which will prevent the prolapse from re-occurring.

## **Further Information**

If you are experiencing any of the problems mentioned in this factsheet, you may wish to seek advice from your GP or local continence clinic. The continence clinics are run by the NHS and you don't always need to be referred to a clinic by your GP, as some clinics will allow you to book an appointment yourself. To find your nearest NHS continence clinic please visit our Find a Healthcare Professional on [www.bladdereandbowel.org](http://www.bladdereandbowel.org).

Pelvic floor muscle exercises are also very useful for strengthening the muscles that support the bladder and bowel. Performing these exercises can help alleviate symptoms and can often prevent the problem from worsening. For more information about pelvic floor muscle exercises, please see our Pelvic Floor For Women factsheet in the [Resources section](#) of our website

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## Products Available

There are many products available that can help you manage symptoms resulting from a prolapse, such as urinary urgency and frequency or stress urinary incontinence. Products including pads and pants, pessaries or portable urinals may be helpful whilst you are seeking treatment. It is recommended that you always seek advice from a health professional before you try any product as there may be other more appropriate options available to you.

If you are struggling with incontinence speak to your GP who can arrange for you to have an assessment to see if you are eligible for free pads, pants or other suitable products. As an individual you can also choose to buy your products directly from a supplier.

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The Bladder and Bowel Community provides information and support for people with bladder and bowel issues. We publish a wide range of user friendly booklets and factsheets.

For more information please call us on 01926 357220, email [help@bladderandbowel.org](mailto:help@bladderandbowel.org) or write to us at The Bladder and Bowel Community, 7 The Court, Holywell Business Park, Northfield Road, Southam, CV47 0FS.