

Vaginal prolapse is a common condition where the bladder, bowel or womb descends into the vagina. Symptoms of a vaginal prolapse include:

- The sensation of a vaginal lump
- Constipation
- Difficulty emptying the bowel or bladder
- Problems with sexual intercourse.

Treatment of a vaginal prolapse is recommended when you are experiencing symptoms. A ring pessary is one way that a vaginal prolapse can be treated.

What is a ring pessary?

A ring pessary is a device which is inserted high inside the vagina to hold a prolapsed vaginal wall or uterus in place. Every prolapse is different so there are a variety of types and sizes of pessaries. Some have a modification that can help with bladder control. Pessaries are fitted by estimating the size required and either increasing or decreasing the size if it is uncomfortable or falls out. It may take more than one fitting to find the correct size and shape pessary for you.

When the pessary is in the correct position you should not be able to feel it and your symptoms should be relieved. After the pessary has been inserted you can resume all of your normal day to day activity, including sexual activity.

How long will I need a pessary for?

A ring pessary can be used as a temporary measure until you have surgical correction of your prolapse. They can also be used as a long-term option if you prefer a non-surgical treatment, when you wish to have further children or where surgery may not be a safe option due to health problems.

If you are breastfeeding or are postmenopausal, you will be prescribed local oestrogen replacement (vaginal cream). The cream will help prevent vaginal infections and also help prevent the pessary rubbing an ulcer on your vaginal wall. It is important to insert the cream into the vagina twice a week preferably at night time.

Will I have a follow-up appointment?

A gynaecology clinic follow up appointment will be arranged within 3-4 months after fitting the pessary. At this appointment you will be asked if you have had any problems with bleeding, discharge, urinary problems, bowel problems or discomfort and also if you have had any new symptoms from the prolapse. Your symptoms will be reviewed and your long term plan discussed and updated as necessary.

You will be examined by the clinic nurse or doctor. With your consent the ring pessary inserted at the previous appointment will be gently removed by inserting a well lubricated finger into your vagina. A speculum will then be inserted into the vagina so that the vaginal walls can be examined for any abnormalities, such as infection or ulcerated areas. If there are no problems your pessary will be washed and reinserted using a lubricant or oestrogen cream.

When should I request an earlier appointment?

Please phone the clinic nurse the same week and don't wait for a follow-up appointment if you have any of the following:

- If things don't 'seem right' and you are uncomfortable
- If your pessary falls out

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- If your bladder or bowel control becomes worse
- You have an offensive vaginal discharge or any vaginal bleeding.

Other Potential Issues

When a pessary corrects a bladder prolapse and un-kinks a blockage in urine flow, some women find that their bladder control is poorer when they cough or sneeze. This is called 'occult stress incontinence'. It is important to let your gynaecologist know if this does happen. The problem can be specifically addressed during prolapse surgery or helped by fitting a different type of pessary.

You can remain sexually active when you have a ring pessary inserted. If sexual intercourse was previously difficult due to the prolapse getting in the way, causing pain or discomfort you may find that the ring pessary can actually help.

If you find that the ring pessary makes sexual intercourse difficult you can be taught to safely remove and refit the device yourself.

Some of the newer pessaries have a metallic core that can be detected by x-rays and some metal detecting systems. These pessaries are ok at airports.

The pessary would need to be removed if you were to have a magnetic resonance imaging scan (MRI).