



## PELVIC ORGAN PROLAPSE

### June is Pelvic Organ Prolapse (POP) Awareness month.

Pelvic organ prolapse is a common problem that affects up to 50% of women, with 1 out of 9 women needing surgery for prolapse in their lifetime. While prolapse is rarely a life-threatening condition, it will not go away if you ignore it. Help *is* available.

### What is Pelvic Organ Prolapse?

This condition refers to the bulging or herniation of one or more pelvic organs into or out of the vagina. The pelvic organs consist of the uterus, vagina, bowel, and bladder. Pelvic organ prolapse occurs when the muscles and ligaments (a network of supporting tissue) that hold these organs in their correct positions become weakened.

A prolapse may arise in the front wall of the vagina (anterior compartment), back wall of the vagina (posterior compartment), the uterus and/or top of the vagina (apical compartment). Many women have a prolapse in more than one compartment at the same time.

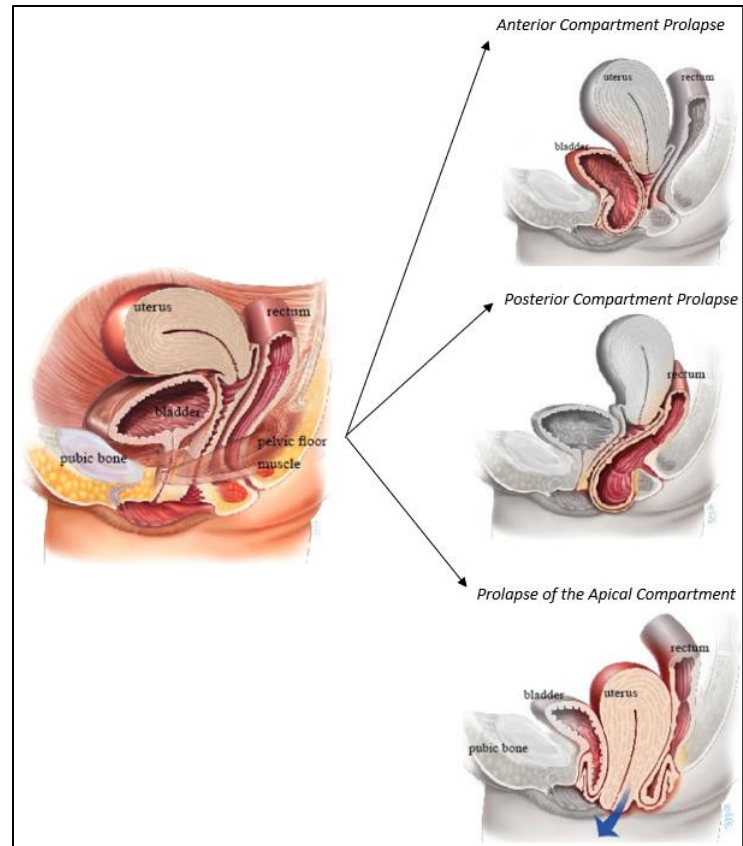
### What causes Pelvic Organ Prolapse?

Prolapse is caused by damage to the ligaments and muscles that support the pelvic organs and can worsen as you age. Things that can press down on your pelvic organs and lead to prolapse are:

- Pregnancy and child birth
- Chronic cough
- Heavy lifting
- Constipation/Straining

### What are the signs of prolapse?

There are a few symptoms that may suggest you have a prolapse, but they depend on the type of prolapse you have and its severity. Early on, if your prolapse is mild your doctor may notice it during a pelvic exam or pap smear, even if you are not aware of it. If you are not noticing any symptoms, no treatment is necessary.



When the prolapse is more severe, you may experience:

- A heavy dragging feeling in the vagina or lower back
- A feeling of a lump in or outside the vagina
- Urinary symptoms such as slow urinary stream, a feeling of incomplete bladder emptying, urinary frequency or an urgent desire to pass urine, and/or urinary stress incontinence
- Bowel symptoms, such as difficulty moving the bowel or a feeling of not emptying properly, or needing to press on the vaginal wall to empty the bowel
- Discomfort during sexual intercourse

*This information is intended to be used for educational purposes only. It is not intended to be used for the diagnosis or treatment of any medical condition, which should only be done by a qualified physician or other health care professional.*



## What should you do?

If you believe you might be experiencing pelvic organ prolapse you are encouraged to talk to your healthcare provider. He or she may examine you to assess if you have a prolapse, what type of prolapse you have, and offer treatment options that are tailored to your needs. As every woman is an individual, treatment can come in the form of lifestyle modifications, pelvic floor exercises, vaginal pessaries, or surgical options.

For more information on some of the topics mentioned in this resource sheet, visit our patient website, [www.YourPelvicFloor.org](http://www.YourPelvicFloor.org).

- [Pelvic Organ Prolapse](#)
- [Pelvic Floor Exercises](#)
- [Vaginal Pessary for Pelvic Organ Prolapse](#)

## Surgical information:

- [Anterior Vaginal Repair](#)
- [Colpocleisis](#)
- [Posterior Vaginal Wall & Perineal Body Repair](#)
- [Sacrocolpopexy](#)
- [Sacrospinous Fixation/Illeococcygeus Suspension](#)
- [Uterine Preservation Surgery for Prolapse](#)
- [Vaginal Hysterectomy for Prolapse](#)

*This information is intended to be used for educational purposes only. It is not intended to be used for the diagnosis or treatment of any medical condition, which should only be done by a qualified physician or other health care professional.*