Pessaries for vaginal prolapse

Information for patients
Gynaecology
We have written this information to help explain the use of vaginal pessaries in the treatment of women with prolapse. If you need any further information, please ask the doctor or nurse involved in your care.

**What is a prolapse?**

A prolapse is a common condition where the vagina and/or the womb (uterus) and neck of womb (cervix), come down into the vagina. Sometimes prolapse may come outside (protrude from) the vagina, so that it is visible or can be felt on the outside.

**How is it caused?**

Prolapse is caused by a weakness in the ligaments and muscles that support the vagina. These supports may weaken with age, following childbirth or after the menopause. Some women are prone to developing prolapse if their ligaments or muscles are more stretchy or lax.

**What symptoms are associated with prolapse?**

Many women with prolapse have no symptoms or problems at all. Quite commonly, symptoms or problems associated with prolapse actually have another cause. This means that even if prolapse is found when a woman has bowel, bladder or vaginal symptoms (such as constipation, incontinence or pain during intercourse), the prolapse itself may not be causing these symptoms, and fixing the prolapse may not completely cure them.

Where there are symptoms these can include:

**Vaginal** - A 'dragging' sensation of something coming down or a bulge in the vagina. Laxity of the vaginal walls and difficulty retaining tampons.
Bladder - Difficulty emptying the bladder, incomplete bladder emptying or having to push the vagina and bladder up from below in order to empty the bladder.

Bowel - Some women find that they have to support or 'splint' their vagina with a finger or fingers in order to pass a bowel motion.

Sexual problems - A feeling of 'something in the way' inside the vagina, or discomfort during sexual activity can be caused by a prolapse. Some women feel inhibited or worried about prolapse and this interferes with their enjoyment of sex.

What is a vaginal pessary?

A vaginal pessary is a device that is inserted into the vagina to lift up the prolapse. There are different types of pessaries. The pessaries commonly used in this Trust are ring, shelf and gelhorn pessaries.

Ring pessary: This is the most common pessary used. It is a flexible ring made of silicone rubber or vinyl and comes in different sizes.
**Shelf pessary:** This is flat and kidney shaped with a raised handle in the middle. This handle helps the doctor or nurse insert your pessary. The pessaries are hard and non-compressible, however, they are still comfortable to wear.

![Shelf pessary image](image1)

**Gelhorn pessary:** This is a silicone pessary that is saucer shaped with a raised handle in the middle similar to shelf pessary. However, it is softer and allows easy folding for insertion.

![Gelhorn pessary image](image2)
How does a vaginal pessary work?

The pessary is inserted high into the vagina where it then supports the vagina and prevents the upper vagina, womb (uterus) and neck of the womb (cervix) from coming down (prolapsing).

What are the benefits of a vaginal pessary?

A pessary should reduce a prolapse and reduce or relieve any symptoms caused by a prolapse. Most women with these pessaries inside cannot actually feel them.

Are there any problems with using a vaginal pessary?

Yes, there are some side effects and these may include:

- Discomfort in the vagina or pelvis during and after the pessary is inserted
- Vaginal discharge
- Vaginal bleeding/soreness (caused by the pessary rubbing against the neck of the womb/vaginal wall)
- Urinary incontinence may occur after a pessary is inserted due to re-positioning of the bladder

All of these problems may be reduced by ensuring that the pessary is the right size, in the correct position and changed on a regular basis. If you do experience any abnormal vaginal bleeding, you should inform your doctor, as this may be an indication of another problem (unrelated to the pessary or prolapse), which may need investigating. Sometimes it may be necessary to remove the pessary for a few weeks to allow things to settle down.
How is a vaginal pessary inserted?

A trained doctor or nurse in the clinic will fit the pessary. The doctor or nurse will explain the procedure and answer any questions or concerns that you may have. Before the pessary is inserted, you may be asked to:

- Empty your bladder - this helps reduce any discomfort
- Remove your underclothes - a sheet will be provided to cover you up
- Lie on the examination couch with your ankles together and knees apart

Once you are comfortable the doctor or nurse will perform a vaginal examination. They may then insert an instrument (speculum) to look at your vagina and cervix (neck of the womb) to check for any abnormalities. A rectal examination may sometimes be performed to look at prolapse involving the back of the vagina or bowel.

After the examination, the doctor or nurse will assess the type and size of pessary to be inserted. They will then usually apply lubricant or hormone cream to the pessary and using a gloved hand, insert it high into the vagina in the correct position.

After the procedure, the doctor or nurse may ask you to 'bear down' (as if having your bowels open). This is to check the position of the pessary and try to ensure that it is in the correct position and unlikely to drop out.

Some women remove and replace their pessaries themselves. If you wish to consider this option you should discuss it with your doctor.
What if the pessary feels uncomfortable, becomes loose or falls out?

If you are experiencing any discomfort or if your pessary becomes loose or falls out you should contact your GP or Gynaecology Outpatient Department.

Can I continue to have sexual intercourse?

If a ring pessary has been inserted you can continue to have intercourse. You and your partner may be aware of the pessary, but it should not cause a problem or harm to either of you. Many women and their partners have entirely normal sex lives with a ring vaginal pessary in place. However, if you have a shelf or a gelhorn pessary in place, sexual intercourse is not advised.

Will I be able to have a bath or swim with a vaginal pessary in place?

The vaginal ring pessary should not interfere with activities such as swimming or bathing. It is important to maintain good personal hygiene with a pessary in place to reduce the risk of infection.

Is there anything I should look out for?

You should contact your GP if you have any concerns about your vaginal ring pessary.

For instance, if you:

- Experience any vaginal pain or soreness
- Have increased vaginal discharge or bleeding
- Feel that the pessary has become loose or fallen out
- Are unable to pass urine
Will I need to come to clinic for a check up?

All patients with a vaginal pessary will be asked to return to the clinic every 4 to 6 months for the pessary to be changed. However, if you have a ring pessary and your GP practice provides this service, you may be advised to see your GP. If you are having any problems or complications, you may need to attend your GP practice or gynaecology clinic more often.

Who should I contact if I have concerns?

If you would like any more information or are worried about anything to do with this procedure, please do not hesitate to contact us as follows:

Gynaecology Outpatient Department

- 0114 226 8441