How long will I need a pessary for?

A ring pessary can be used as a temporary measure until you have surgery for the prolapse. They can also be used long term if you don't want to have surgery, or where surgery may not be safe for health reasons or you plan to have more children.

Can I have sexual intercourse with a pessary in place?

Please talk to your nurse, doctor or physiotherapist about this. You can have sex with a ring pessary in place, but you cannot with a 'Gellhorn' pessary. We can teach you how to remove and replace the ring pessary if it feels uncomfortable while you're having sex.

What happens if I have a problem with my pessary?

Please contact Gynaecology Outpatients Department, the Royal London Hospital on 02035941585

Patient Advice and Liaison Service

If you need general information or advice about Trust services, please contact the Patient Advice and Liaison Service (PALS) on 020 3594 2040 or visit www.bartshealth.nhs.uk/pals. Alternatively please contact staff who are providing your care if you require clinical advice.

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Patient information

Having a pessary for a vaginal prolapse



Introduction

This leaflet will explain the benefits, risks and alternatives to having a pessary fitted for vaginal prolapse. Please ask your doctor or nurse if you have any further questions.

What is a vaginal prolapse?

Vaginal prolapse is a common condition where the walls of the vagina and sometimes the womb are no longer supported. They bulge down within and sometimes outside the vagina. A vaginal prolapse is not harmful but treatment should help to ease your symptoms.

Common symptoms of a prolapse include:

- the feeling of a lump in your vagina
- not being able to empty your bladder or bowel fully
- difficulty with sexual intercourse
- lower backache.

A prolapse is usually caused by a combination of different things, such as:

- pregnancy and childbirth
- chronic constipation and straining
- lots of heavy lifting
- being overweight
- chronic coughing
- getting older.

What are the treatments for vaginal prolapse?

The treatments for vaginal prolapse are:

- pelvic floor exercises
- pessary and pelvic floor exercises
- surgery.

Pelvic floor exercises help to strengthen the muscles that hold your vagina in place. If these exercises don't improve your prolapse and you want to avoid surgery, a vaginal pessary may be a suitable treatment. Your doctor, nurse or physiotherapist will talk through the options with you.

What is a vaginal pessary?

It is a plastic or silicone device which is inserted into your vagina to hold a prolapsed womb or vaginal wall in place. You will be fitted with either a ring or 'Gellhorn' pessary, depending on the type of prolapse that you have.

What are the benefits?

Having a pessary inserted won't cure your prolapse, but it may help to ease the symptoms and make you feel more comfortable. This will allow you to continue with your everyday activities such as exercising, working and caring for your family.

What are the risks?

You may notice more vaginal discharge that normal, which may have an odour. You may also experience vaginal irritation. Women who have passed the menopause may find the use of oestrogen helpful.

How is the pessary fitted?

Before you have a pessary fitted, you will have a vaginal examination to find out the size of pessary you will need. It may take more than one fitting to find the correct size for you. If it is uncomfortable or falls out, you may need a different size of pessary. You will be asked to walk around and go to the toilet to pass urine once your pessary has been fitted. When the pessary is in the correct position, you should not be able to feel it.

How often should my pessary be changed?

It is recommended that the pessary should be changed every six months. At each visit the pessary will be changed and a check up will be performed to examine the underlying skin for ulceration or other problems such as infection.