Abstract

The Change Of Female Sexual Function After Vaginal Mesh Repair Versus Native Tissue Repair For Pelvic Organ Prolapse: A Meta-Analysis Of Randomized Controlled Trials

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Objective: To evaluate the change of female sexual function after vaginal mesh repair versus native tissue repair for pelvic organ prolapse.

Methods: Eligible studies, published through November 2017, were retrieved through ClinicalTrials.gov, MEDLINE, Embase, and Cochrane databases and bibliography searches. We included randomized control trial of transvaginal prolapse surgeries by either mesh repair or native tissue repair regarding the outcomes of sexual function, de novo and postoperative dyspareunia with a minimum of 3 months of follow-up.

Results:Twenty-two trials (1,307 vaginal mesh repair and 1,298 native tissue repair) including 2,605 patients were identified. There was no difference of postoperative dyspareunia after vaginal mesh repair versus native tissue repair (risk ratio, 1.05; 95% CI, 0.8-1.37). Likewise, there were no difference of de novo dyspareunia after vaginal mesh repair versus native tissue repair (risk ratio,0.91; 95% CI, 0.54-1.55). There was also no difference of PISQ-12 score after vaginal mesh repair versus native tissue repair (mean difference, -0.18; 95% CI, -1.25-0.89)

Conclusion: Sexual function, de novo and postoperative dyspareunia were similar in patients after vaginal mesh repair and native tissue repair.

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