

Contributing questions to the 25:

<p>What level of prolapse will improve with the use of a pessary</p>	<ul style="list-style-type: none"> -How bad does the prolapse have to be before this is considered -when can I suggest? -what type and extent of pop benefits with pessary -what types of prolapse/level of severity are likely to respond well to pessaries? -What degree of POP is a pessary most effective for? -the manufacturer's recommendations that ring pessaries are only suitable for women with stages I and II prolapse or that Gellhorn or other spaceoccupying pessaries should be used in women with stages III and IV prolapse -which treatment is better for stage 2 cystocele -Having said that a lady in my work just now using pessary and has worked out very well for her, been using it for a number of months now without any problems. So maybe works well if prolapse not too far advanced.
<p>Should women using pessaries be offered supervised pelvic floor muscle exercises</p>	<ul style="list-style-type: none"> -Is it of any benefit to continue pelvic floor strengthening exercises after receiving a pessary? -This is such a sensitive and silent subject and I believe that anyone wearing a pessary or even being offered one should also be offered more information about core stability exercises instead of just being fobbed off with "are you doing your pelvic floor exercises" . Education about our bodies is really really important for our children and grandchildren. -What muscle training exercises might help? -which exercises is good for it
<p>Should a younger woman with a non-bothersome prolapse be encouraged to use a pessary to prevent future problems</p>	<ul style="list-style-type: none"> -Should we encourage the younger woman with prolapse to wear a pessary as a prophylactic measure even if her symptoms are not troubling her
<p>What are the risks and complications of pessary use for prolapse</p>	<ul style="list-style-type: none"> -are there any risks in using a pessary -Does the use of a pessary increase the risk of urinary tract infection? -Is it as effective as surgery? -What are the risks of having a pessary -What are the risks associated with using a pessary? -What are the risks associated with pessary use? -Is it common for a ring pessary to impede urine flow when voiding? How can this be avoided/moderated. -Is there any risk of infection by using a pessary? -What are the risks? Eg worsening of prolapse, pain, ulcers or infection. -If a pessary use causes complications, what other treatments are available. -What are the risks? -why does inserting and removing the pessary cause bleeding -can the pessary cause infection -how to avoid infection -why does it cause bleeding -does it ever block the urethra -does where the pessary is affect the ability to self catheterise -what complications are associated with a pessary? -Can pessary travel further up and cause damage to my vagina? -am I more prone to infection with a pessary in? -why does inserting and removing the pessary cause bleeding -If a pessary use causes complications, what other treatments are available -If a vaginal erosion is noted, patients are instructed to keep the pessary out for 2–4 weeks and to use 1 gram of intravaginal estrogen cream nightly until the erosion resolves -is a vaginal pessary one of the causative factors of vaginal evisceration -noticeable increase in vaginal infections which might be due to non-hygienic insertion or the antibiotic-resistant pathogens of vagina -The most common complication associated with use of a pessary is the development of a vaginal ulcer (Sarma 2009) -Could a pessary make a retroverted womb more retroverted? -Can a pessary cause thrush? -I had a ring pessary fitted today and now I can't pee properly - is this normal? -Stress incontinence is a common side effect of pessary's for lots of women -got a ring pessary today for easy removal the nurse in the pelvic clinic tied a wax dental floss to the pessary. I forgot to ask about probable infection it could cause -I feel pressure on my rectum and my lower back hurts. Is this normal as your body adjusts to having a pessary fitted? -Has anyone has red spotting from the pessary? -Have a silicon type pessary ring inserted around the neck of the uterus to hold everything up in place. This remains in situ for 6 months and is then changed by a GP to minimise the risk of infection.
<p>Can women be taught to manage their own pessary</p>	<ul style="list-style-type: none"> -can I put the pessary in myself? -Is it really necessary for women to attend to clinics to have their pessary changed if appropriately selected they could self manage? -and are they user friendly? -Can they be put in easily by the patient -can the patients not do it themselves

	<ul style="list-style-type: none"> -Why don't you teach me how to take it out right away? -I wish you told me how to take it out... it was really uncomfortable and I didn't want to travel 4 hours to have it removed by you... -Why can't I put it in and take it out myself? -Can you fit/change it yourself -Can a patient change her own pessary? -Can women manage the pessary themselves? ie take it out and refit -Some women are taught to remove and re-insert their pessary before and after sex. Is this something you may consider if offered? -why aren't more women given pessaries they can fit and remove themselves? -why are women not taught to self manage the pessary once fitted -Are there pessaries that can be self inserted easily? -is it possible to have a pessary you can take out -How can it be made more widely known to medical professionals that women can be taught to manage their own pessaries? -can pessaries be made more user friendly? i.e.can woman insert and remove as and when they want to? -Which pessaries are easiest for the patient to fit and remove themselves?
<p>Do pessaries have an effect on the psychological wellbeing of women</p>	<ul style="list-style-type: none"> -The cost of trying various sizes of ring pessaries on the emotional well-being of patients is immeasurable -2. how using a pessary affects the physiological and social aspects of women using a pessary
<p>Are pessaries effective as a long-term treatment for prolapse</p>	<ul style="list-style-type: none"> -how long can they be used for? -How long would a pessary last? i.e when would it need replacing? -How long can pessaries safely be used for in years with appropriate cleaning and replacement as required? -how long can I use the pessary for -how long will it last? -Is long term use of a cube or any other type of pessary safe? -How long are patients happy to wear them and what comes next - i.e surgery -how long can they be used for if there are no problems
<p>What is the best way to minimise and treat vaginal discharge caused by pessaries</p>	<ul style="list-style-type: none"> -What is the best treatment if any for vaginal discharge in pessary patients -how can discharge be reduced with longer term pessary use? -is there any way of reducing the discharge from the vagina -how to avoid discharge -What is the best management for vaginal health when using a pessary? -Why do women develop such a large amount of discharge with a pessary in situ? --Is one particular type of pessary more likely to cause discharge
<p>What is the ideal training to be a 'qualified' pessary practitioner</p>	<ul style="list-style-type: none"> -What training is there? -Do I have to have official training in pessaries before offering them to women ? -Would I get training? -What qualifications do practitioners need to hold to fit pessaries? -How does a physio. learn to fit pessaries? -What training does a women's health physio need to be accredited competent in pessary management -How can we set up a pessary fitting service as part of our physiotherapy treatment? -What training is required to fit/follow-up pessary users? -I have concerns to make as patient advocate re: some unqualified people fitting pessaries and charging patients for the service of fitting the pessary, then 2nd charge for the pessary itself-which is totally supported. -What training should be provided prior to clinicians fitting pessaries? -In the UK how much training is given professionals fitting pessaries for prolapse? -What credentialling is required for health professionals to safely fit pessaries
<p>What difference does a pessary make when used to treat a prolapse</p>	<ul style="list-style-type: none"> -Just that I was so pleased when I got my first ring pessary. It made such a difference not having that 'dragging' feeling. -How much should symptoms be reduced? -How likely is it to help symptoms? -Could pessaries help the vaginal heaviness felt after childbirth? -Does it not cause more internal trigger points? -Are pessaries helpful for those women suffering with grade 1. Prolapse to To simply help them feel Supported / less heavy? -Do pessaries completely put the prolapse back into place ? -Does it help with vaginal and bowel prolapses -Are removable pessary devices like the cube any worse for symptom relief than ring pessaries designed for longer use in situ? -when a pessary is inserted, does pelvic floor function improve? -Affect on presenting symptoms -Pessaries are the best choice for immediate relief of urinary stress incontinence and for reducing a prolapse -Can a pessary help with pain associated with POP? -And sorry if tmi but I feel my walls are very lax would a pessary make things feel tighter again? -It doesn't prevent the prolapse getting worse and I did eventually have surgery which is much more satisfactory. -as my prolapse's got worse the pessary got bigger -Perhaps a pessary can be thought of as a device that may be worn prophylactically to slow progression of disease. -Little data in the literature describe whether or not pessary use prevents prolapse progression

	<ul style="list-style-type: none"> -whether pessary usage can improve prolapse even after discontinuation -will I always need the same size of pessary? -Can pessaries be used to prevent progression of prolapses? -will my prolapse continue to get worse even if I use a pessary? -Can the degree of prolapse become less over time with the use of a pessary? -Does it improve symptoms or just stop them from getting worse. -Does wearing a pessary while participating in high impact exercise minimise prolapse progression -Are pessaries possible Preventative of further prolapse ? -could it make a prolapse worse over time? -Do pessaries help to prevent prolapse worsening in young active women? -Can the use of pessaries exacerbate some prolapse, i.e. a ring pessary can make a rectocele worse, or even led to a rectocele? -Do pessaries prevent prolapse from progressing? -Do pessaries halt prolapse worsening /deterioration? -Does early pessary use in women with stage 1 prevent or accelerate progression to clinical prolapse
<p>What is the role of physiotherapy as part of pessary management for prolapse</p>	<ul style="list-style-type: none"> -Does short term use of a pessary aid the conservative recovery from POP. That is, is it possible that using it with PFME may mean not needing it in the future? -Can women achieve better activation of the pelvic floor muscle complex when a pessary is in situ? -is physiotherapy a better first line option than pessaries?
<p>What is important for a pessary self-management programme</p>	<ul style="list-style-type: none"> -will I have to sterilize it? -how often will I have to take it out? -what to clean pessaries with -How do I clean it? -Can I wash and use it lifelong
<p>Which pessary should be used for which prolapse</p>	<ul style="list-style-type: none"> -what type of pessary is the best? -which type of pessary is best for which type of prolapse -which pessary type is best for which problem -Likely failure with one type of pessary over another. -What type of pessary is best for me -Which pessary is best for different kinds of prolapse? -Which pessaries should be used for which kind of prolapse? -Are they different to the shelf insertion? -What type of prolapse does a pessary help? -Which pessaries work best for which prolapse -Which pessary suits which type of prolapse -Are pessaries suitable for all types of prolapse? -Does it suit all types of prolapse? -Which type of ring pessary (standard, silicone, the one with the thicker part on it) is best for women? -What type of prolapse is most effectively managed with pessaries? -What type of pessaries work best for which prolapse? -Who/which types of POP are the most likely to be associated with longterm use of pessaries? -Are there different types of pessary? -Which pessaries are easiest for the patient to fit and remove themselves? -Which is the best pessary? -Which pessary for which prolapse? -Which pessaries are most effective for anterior prolapse, posterior and vault/cervical prolapse at different grades of prolapse. -which pessary for which prolapse -What Pessary would be the best option to trial for various Prolapses, ie a vault prolapse -Which pessary type is best suited to which type of pop -Randomized clinical trials are needed to define optimal pessary use, including the indications for support pessaries compared with space-filling pessaries -The evidence as to which pessaries are most effective in relieving symptoms associated with specific defects is a clinical question that remains to be answered - what's the best pessary for supporting bladder and bowel prolapse at the same time? -How effective are continence pessaries at reducing symptoms of prolapse and incontinence? -which pessary is best for patients with a mild cystocele -Can pessaries be used for urethrocele? -What is the most effective pessary for treating cystocele -Can a pessary help a urethrocele? -Is pessary help for anterior wall?? -Which pessary do you find most useful to support rectocele? -Will this help my Rectoprolapse? -Is a pessary beneficial for a rectocele? -what pessary gives best posterior wall support? -are pessaries less effective for posterior prolapse -What type of pessary so you wear for your rectocele? -What type of pessary so you wear for your rectocele, and for those with rectocele coming out of them how do you keep it supported inside of you? -Which pessaries can be used successfully if a woman has a levator avulsion injury? -What type of pessary is best for women with bilateral levator avulsions

	<ul style="list-style-type: none"> -How to use a pessary in a patient with complete procidentia of the uterus -Are pessaries just used to treat womb prolapse only ? -Is there a pessary to support the vaginal wall as well as the cervix? My ring pessary does not do this.
Are pessaries effective in the treatment of prolapse	<ul style="list-style-type: none"> -How effective is the pessary in treating POP? -How effective are pessaries at improving quality of life for women with grade 1/2 prolapse -How effective is a pessary at treating a prolapse? -will it make the prolapse better -Are pessaries effective in the treatment of prolapse' -Can a pessary actually make a POP better/improve?
When is a pessary the right treatment for prolapse	<ul style="list-style-type: none"> -should pessaries be used to provide immediate symptomatic relief for recurrent prolapse while a treatment plan is devised -Is a pessary necessary in all cases of prolapse -is a pessary necessary in all cases of prolapse -Is a pessary the right intervention for a prolapse. -is there anything else that can be used except surgery if pessaries do not do the job -When will a pessary not be beneficial?
Do the risks and complications of pessaries increase with long-term use	<ul style="list-style-type: none"> -Does long term use cause other health problems? -What is the prevalence of erosions when using a pessary? -What is the risk that a neglected /forgotten pessary inserted for an elderly patient will cause significant complications -Risk factors for failure -What are the risks of long-term pessary use (attended or unattended)? -should the amount of discharge increase the longer the pessary is inserted -A consultant once told me that the tissue of the vaginal wall becomes a little worn from long-term use of a pessary and therefore, surgery for a prolapse repair can be more difficult. Is this a common view of consultants? -We do however believe that lack of follow-up would result in this or similar complications irrespective of type of pessary used. -Where follow-up cannot be assured, pessaries are an unsuitable treatment modality due to the risk of serious complications -Is there any evidence of a pessary eroding the tissue between the vagina and rectum? -Pessary works quite good for a while if you can get the right size but long term use can cause ulceration.
Is a pessary as acceptable as surgery for the treatment of prolapse	<ul style="list-style-type: none"> -comparison of costs of pessary use over time versus surgery -future randomized controlled trials that compare pessary use with surgery ideally would recruit older women, because they might be less likely to withdraw from the pessary arm of the study and choose to undergo surgery. -is pessary use a sign of operative failure -are vaginal cube pessaries a viable alternative to surgery -which is better to manage a prolapse - pessary or surgery -how to choose between an operation and a pessary while still fit and healthy ---when do I do something more permanent -How often do women change from using a pessary to an operation? -Are there studies comparing acceptability of pessary vs operative intervention? -Many women want the latter and are fit for surgery but see stuck with pessaries and over years- the pain and local irritation are awful- seem fine short term for " holding" but not long term. -I have had a hysterectomy and prolapse operation, which now I am facing another operation less than 2 years on. Is the pessary an alternative or a delay until further operations are considered for a patient? -Is it better than obliterative surgery for elderly, sexually-inactive women? -When would you choose a pessary over surgery in a woman who has completed her family, is fit and strong -How is it decided who is suitable for pessary and who needs surgery .?
How might a pessary affect sexual activity	<ul style="list-style-type: none"> -Will it affect sex life? -What effect will it have on sex life? -Are you able to have a sexual relationship with a pessary in? -How will the used of a pessary affect my sexual activity? -Does it affect your ability to do everyday tasks or exercise / have sex etc -Are you sexually active- if so, does the presence of a pessary create problems? -Does it interfere with coitus? -Can I still have penetrative sex -can I have intercourse (sexual) with pessary -Can I have sex with a pessary in ? -Can you sex with a pessary in place? -Can you feel it when you have sex -(can I have intercourse (sexual) with pessary), if yes will my partner be able to feel it? -will my husband be able to detect my pessary? -can you feel the pessary during sex? -do different pessaries affect sexual function? -No data have been published on the effect of pessaries on sexual function -Have you either the maker of the pessary or the healthcare professional tried to have sex with one of these things inside of you? I could not bring myself to have sex with a ring pessary in me because of the side effects and I felt so depressed and lacking in any self confidence or any sexual feelings at all I just wanted to die losing this bit of my life. It would be great for some understanding and experience from the 'giver-outers' of the pessaries. Now do not get me wrong, I did feel very supported with it in but after a week or so I felt panicked

<p>When should oestrogen cream be used with a pessary</p>	<p>having a foreign body inside of me and the inability to be intimate and talk to my husband about this.</p> <ul style="list-style-type: none"> -Role of topical oestrogen -Does oestrogen help? -How does local estrogen help? -The use of topical vaginal oestrogen (in the absence of any contraindications) in postmenopausal women and women with vaginal atrophy may be helpful in reducing pessary complications and is commonly prescribed, however, high level evidence for its use is lacking. -This review did not find any clear evidence to suggest whether oestrogens work. However, as they are often used, especially with pessaries or before and after prolapse surgery, research is needed to identify any benefits or risks. -the consideration of vaginal estrogen supplementation to lengthen pessary use among postmenopausal women electing to use a pessary as the treatment modality for prolapse and/or urinary incontinence. -to assess conclusively whether vaginal estrogen enhances comfort and reduces complications of support pessaries for prolapse -Does use of oestrogen creams with pessaries increases satisfaction and persistence, or decreases adverse events? -Do topical estrogen improve the vaginal sensation when using pessaries? -what other measures improve effectiveness of pessaries (eg use with oestrogen cream, physiotherapy...) -should all post menopausal women use topical oestrogen while using pessaries -Should women be using regular oestrogen cream with pessary use? -Should postmenopausal women use vagina oestrogen treatment alongside pessaries? -Should an oestrogen cream be used as routine, or only with atrophic changes? -Should vaginal estrogen be prescribed for all post menopausal women treated with a prolapse -is it recommended to always have the patient use premarin prior to having a pessary fitted? -Should every woman who has a pessary in situ be prescribed topical oestrogen? -Should oestrogen creams always be used on a several times per week basis when pessaries are fitted. I know some consultants who state that this should be the case, but I know other consultants who do not prescribe it when they fit a pessary
<p>What should be considered when choosing which type of pessary for the treatment of prolapse</p>	<ul style="list-style-type: none"> -what type of pessary to use -what is the best type of pessary to treat prolapse? -How do you decide which size and type of pessary to use? -How I can decide as to what shape suits me. Which is the best that suits me -How do you decide which pessary to try? -What helps decide type of pessary to use -How should the pessary type be chosen? -How does the clinician decide what pessary shape to use? -Are some pessaries better than others (eg ring v cube)? -which pessarie to use? -When would a cube pessary be of benefit? -I wasn't aware of all the different pessary devices available. How does the doctor select which to use -How do doctors/nurses choose which pessary to fit? Size/cost/type etc -How do you decide which pessary will work? -What are the indications for the various pessary shapes and designs? -What criteria determines which type is fitted -How do you decide what type to use? -which type allow the patient to remove for intercourse -how do they choose between different types of pessaries -how will you know if a pessary is the best option for me? -How is the correct pessary chosen ?
<p>Does the use of a pessary during or after pregnancy prevent prolapse</p>	<ul style="list-style-type: none"> -If there is a benefit in the early post natal period on fascia & organ position than can decrease the likelihood of prolapse further on? -I think we (as physios) should be using more Pessaries. Even in the post natal women to get them to return to exercise sooner while the pelvic floor is "catching up" -Does the use of a pessary during pregnancy prevent pop? -Does using a pessary in the postpartum period minimise the risk of pelvic organ prolapse
<p>How safe are pessaries</p>	<ul style="list-style-type: none"> -What are the side effects of using a pessary -Are pessaries safe to use over many years and do they cause infections? -Are there any side affects with the pessary? -Are there any side effects? -What side effects do you 'truthfully' expect with the use of a pessary? I ask this because I got a lot of smelly discharge from wearing a ring pessary. I started to become urinary incontinent and my doctor said I might have a UTI and not feel it. It seemed to be worse almost than the prolapse symptoms and it took me quite a lot of courage to even tell the GP about this. She tried to persuade me to keep it in because I had been so upset about having a prolapse in the first place. Although she is a very kind doctor I did not feel that they can even begin to understand how I felt. -Does pessary use increase/ add to risk of toxic shock syndrome ? -What side effects might occur? -Can the pessary cause side effects and internal infections? -Can a pessary do harm?

	<ul style="list-style-type: none"> -What impact does a pessary have on the integrity of vaginal health? -how safe is a pessary -My mother had a ring pessary fitted for a prolapse many years ago. The following year she developed bowel cancer. Could this device somehow have caused her bowel problem? -Are there any safety concerns with the use of pessaries for prolapse? -Death, although rare, is a reported complication and should be included in the informed consent of patients undertaking long-term pessary use -she did suggest a ring pessary, but I refused as I had heard horror stories of them causing infections and ulcer sores
<p>What is the best way to assess what type and size of pessary to use</p>	<ul style="list-style-type: none"> -Are there different sizes to fit different women? -Which pessary have you felt was the best fit for POP -How many pessaries have you tried? -What is the most effective way of assessing the size of pessary to use? -Ways to calculate type and size of pessary for the patient -Why do pessaries seem to be so difficult to size correctly? -How do you appropriately change the size of a pessary? -Why can a pessary not come in more sizes ? I am between 2 sizes and therefore one drops out and one is too big. -What technique of assessing for size/shape of pessary results in best fit/retention/comfort -How do you decide what size to use? -How big can you progress with the Pessaries if they continue to fall out. -How is size evaluated -How do you know which size of pessary to choose -She has estimated that'll need a size 71 or 74 mm pessary. Can she tell without feeling? Is this the most common size pessary?
<p>Does pessary use in prolapse have a positive effect on physical activity</p>	<ul style="list-style-type: none"> -Can you run/jog/do high impact exercise with a pessary fitted and not make POP worse -With a pessary will I be able to do cross country skate skiing? -Do any of you wear pessaries just for exercise/activity? -Can a pessary just be used for exercise -Can I lift heavy weights at the gym and run with a pessary in ? -Can pessary use during high impact exercise reduce the risk of pop development in postnatal women? -As question three however '...postnatal women with puborectalis avulsion injuries?' (so the question is: Can pessary use during high impact exercise reduce the risk of pop development in postnatal women with puborectalis avulsion injuries?) -Can pessaries be used for exercise only and easily be removed? -Will a pessary enable me to resume activities I have had to give up? -Can pessaries be used to allow women partake in exercises that are traditionally avoided with prolapse -e.g weightlifting?
<p>What things make a difference to help with the long-term use of a pessary</p>	<ul style="list-style-type: none"> -Which factors determine long term satisfaction with pessary use?