

Awareness and the knowledge about reconstructive and obliterative pelvic organ prolapse surgeries among obstetric and gynaecology professionals

BACKGROUND

Surgical management of pelvic organ prolapse (POP) includes reconstructive and obliterative options based on patient needs. Awareness and surgical preferences among OBG professionals vary based on experience and expertise.

AIM

To assess the awareness about reconstructive and obliterative POP surgeries among OBG professionals with varying experience levels.

METHODS

- A cross-sectional survey among 200 OBG professionals across India. Participants (general OBG, urogynecologists, laparoscopic and robotic surgeons) with varying experience levels (<5, 6–10, >10 years) completed a structured questionnaire on demographics, awareness, surgical practices and barriers.
- Data analyzed using descriptive statistics, chi-square tests and logistic regression.

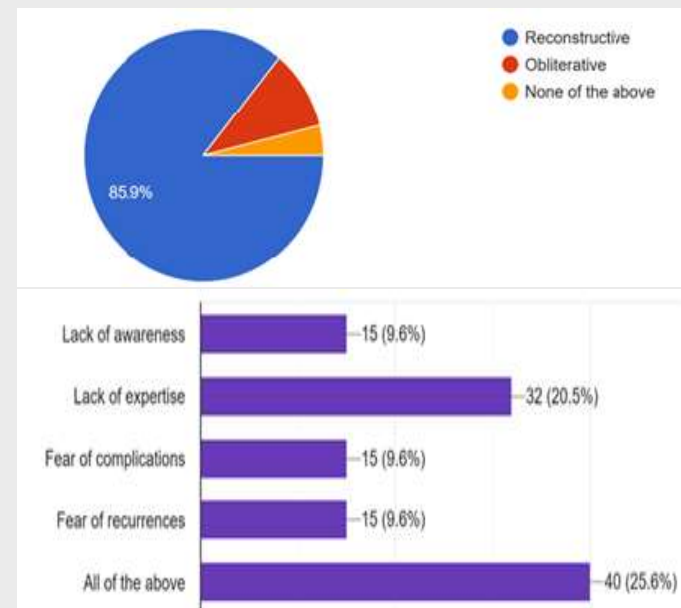
RESULTS

- Overall 86% opted reconstructive over obliterative as the most preferred POP surgery among all age groups.
- Among respondents preferring the vaginal route (VH) with apical suspension, 84.7% chose native tissue repair. Speciality background and years of practice significantly influenced repair choice (LR $p=0.016$).
- General OBG with 6+ years experience preferred open sling surgeries unlike urogynaecologists who preferred minimally invasive sacrohysteropexy for young nulligravida prolapse ($p=0.06$).

- Despite training ,reconstructive vaginal POP procedures were consistently preferred across all experience levels even in elderly not sexually active with no statistically significant variation across urogynaecologists and OBG with 6+years experience($p=0.8$).

CONCLUSION

- Reconstructive POP surgeries remained the dominant choice across all age groups, emphasizing the need for enhanced training in POP surgical techniques to ensure comprehensive and patient-centered care.
- Fear of complications and limited expertise remained major barriers for not opting obliterative POP surgery.



REFERENCES:

- 1 . Murphy M, Sternschuss G, Haff R, Van Raalte H, Saltz S, Lucente V. Quality of life and surgical satisfaction after vaginal reconstructive vs obliterative surgery for the treatment of advanced pelvic organ prolapse. American Journal of Obstetrics and Gynecology. 2008 May;198(5):573.e1-573.e7.

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