

# Comparison of postoperative complication and recurrence after uterine prolapse surgery

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## Abstract

Uterine prolapse refers to a state in which the uterus descends and the cervix is bulge to the vaginal inlet. There are vaginal hysterectomy (VH) and Manchester Fothergill (MF) operation in surgical treatment and MF operation is performed in patients who want to preserve the uterus. Our purpose was to evaluate and compare the MF operation and VH in the patients with uterine prolapse

Methods: We retrospectively reviewed the records of 22 in the MF group and 30 in the VH group for uterine prolapse at Soonchunhyang Cheonan university hospital from January 2011 to December 2015. The SPSS ver 18.0 was used for the statistical analyses. The MF group and the VH group were compared using the Students t-tests or Fisher exact test. P-values less than 0.05 were considered statistically significant.

Results: In basal characteristics, there was no significant difference in age, body mass index, parity, mode of delivery between 2 groups but there were more cases of higher stages of uterine prolapse in the VH group. Median operation time was significantly longer in the VH group (69.7 vs 93.3 min MF, VH, respectively,  $P<.01$ ) and estimated blood loss was significantly more in VH group (112 vs 223 ml,  $P<.01$ ). We found no differences between the MF operation and VH in postoperative complications and recurrence rates of uterine prolapse ( $n=1$  vs 0,  $P\text{-value}=1.000$ ).

Conclusion: The Manchester Fothergill operation in patients with uterine prolapse is as effective as vaginal hysterectomy and should be offered to the patients who wanted to preserve the uterus.

## Biography:

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