Pelvic Organ Prolapse

What is pelvic organ prolapse?
Prolapse is when organs in your pelvis, such as the uterus, bladder, or rectum, bulge into or past the opening of your vagina. It may feel like a bulge or a pouch.

How do I know if I have it?
Most women who have a prolapse do not know they have it. Others may feel pressure or a bulging coming through the opening of the vagina. Your doctor may look for prolapse while examining your pelvis with you lying down or standing up. To help diagnose prolapse, your doctor may ask you to strain (i.e., push as if you are trying to pass urine or stool).

What causes it?
There are many factors that can make prolapse happen. Childbirth may damage your pelvic muscles and ligaments and cause prolapse many years later. Coughing a lot, being constipated, being overweight, or having had a hysterectomy can also put you at risk of prolapse.

How can I prevent it?
Stay at a healthy weight. Avoid constipation and chronic coughing.

What are my treatment options?
If the prolapse is not bothering you, or it is not causing any problems with passing urine or stool, you probably will not need treatment. If you have problems going to the bathroom or if the prolapse is severe, a pessary (PESS-uh-ree) may help. A pessary is a device that is placed inside the vagina to help keep your pelvic organs in place.

What should I know about pessaries?
There are different types and sizes of pessaries. Your doctor will fit you with the pessary that is most comfortable and works well when you are standing, sitting, walking, and using the toilet. After you are fit with a pessary, you will need one follow-up visit in one to two weeks so that your doctor can make sure it is working. Your doctor will then tell you when to schedule another visit and answer any questions you have.

Most of the time, you can take out your pessary, wash it with soap and water, and reinsert it yourself. Some types of pessaries may need to be removed and washed by your doctor. Your doctor may prescribe a cream to apply to your vagina to prevent or treat vaginal discharge.

Most pessaries can be worn during sex. Tell your doctor if you have any bad-smelling discharge, vaginal bleeding, problems passing urine or stool, or any change in your ability to take care of the pessary (for instance, if you have a stroke or arthritis).

What are Kegel exercises?
Kegels (KEE-guls) are exercises that strengthen the muscles of the pelvis. To do a Kegel, you squeeze the muscles of the pelvis as if trying to stop passing urine for 5 seconds, and then rest.
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for 5 seconds. Your doctor can teach you how to do them. You can do these exercises anywhere or anytime, such as when you are watching TV, driving, cooking, or lying in bed, and you will do sets of about 15 or 20 three times per day.

Kegel exercises may help if you have incontinence. This is when you lose urine if you cough or sneeze, or are not able to make it to the bathroom in time after you have the urge to pass urine. Other options for treating incontinence include surgery.

Where can I get more information?

Your doctor

AAFP’s Patient Information Resource
  https://familydoctor.org/vaginal-pessary/
  https://familydoctor.org/kegel-exercises-for-your-pelvic-muscles/

National Library of Medicine
  https://medlineplus.gov/ency/article/001508.htm
  https://medlineplus.gov/pelvicsupportproblems.html

Voices for Pelvic Floor Disorders
  http://www.voicesforpfd.org


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Notes:

This handout is provided to you by your family doctor and the American Academy of Family Physicians. Other health-related information is available from the AAFP online at http://familydoctor.org.

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