🏥 What is Vaginal Repair?

Vaginal repair is a **surgical procedure to correct pelvic organ prolapse**, where the bladder, uterus, or bowel bulges into the vaginal space. This surgery helps restore vaginal support, relieve symptoms, and improve quality of life.

🔷 Vaginal repair may be performed alone or in combination with a **vaginal hysterectomy**, depending on the severity of the prolapse and individual needs.

⚙️ What Happens During the Procedure?

✅ A **small incision is made in the vaginal wall**. ✅ **Weakened support tissue is strengthened**:

- **Anterior repair** – Repairs the tissue between the bladder and vagina (cystocele repair).
- **Posterior repair** – Repairs the tissue between the bowel and vagina (rectocele repair). ✅ Stitches are used to reinforce the vaginal wall and support the pelvic organs. ✅ In some cases, **vaginal hysterectomy** (removal of the uterus) may be performed if indicated.

🔄 Recovery After Surgery

Recovery time varies based on the type of repair performed and individual healing.
✅ **Hospital stay** – Typically **1-3 days**, depending on recovery progress. ✅ **Post-surgery care**:

- A **bladder catheter** and **vaginal pack** (gauze) may be inserted for healing and are usually removed within **24 hours**.
- If bowel repair is done, you may need to **stay until you have successfully opened your bowels**. ✅ **Vaginal discharge and mild discomfort** – Some **bloody vaginal discharge** is expected for a few weeks. ✅ **Activity restrictions**:
- Avoid **swimming, sexual intercourse, and tampon use** for at least **6 weeks**.
- Avoid **heavy lifting** (more than 5kg) to prevent recurrence. ✅ **Pain management** – You will receive **prescribed pain relief**, and a **follow-up appointment** will be scheduled **in 6 weeks**.

🚨 **Contact your doctor if you experience worsening pain, heavy bleeding, fever, or unusual vaginal discharge.**

⚠️ What Are the Risks?

As with any surgery, there are potential risks and complications:

Common Risks

✅ **Mild pain, swelling, and bruising** – Typically resolves within a few weeks.
✅ **Temporary difficulty passing urine**– May require a catheter for a short period.
✅ **Changes in bladder or bowel habits** – Usually improve over time.

Less Common but Serious Risks

- **Bleeding** – Rarely requires a blood transfusion.
- **Infection** – Treated with antibiotics if needed.
- **Injury to nearby organs** – The **bladder, bowel, or ureter** may be affected, sometimes requiring further surgery.
- **Fistula formation** – An abnormal connection between the **bladder and vagina** or **bowel and vagina** may develop, requiring additional surgery.
- **Stress urinary incontinence** – Some women may experience **urine leakage** after the procedure.
- **Vaginal narrowing or shortening** – May cause discomfort during intercourse.
- **Recurrence of prolapse** – Can occur over time, especially with heavy lifting.

General Surgery Risks

- **Blood clots (DVT/PE)** – Rare but possible.
- **Lung complications** – Such as infection or lung collapse.
- **Heart attack or stroke** – Extremely rare but possible risks with general anaesthesia.

📚 Further Information & Support

For more details, visit: 📌 **Urogynaecological Society of Australasia (UGSA)**: www.ugsa.org.au 📌 **Queensland Health – Women's Health Services**: www.health.qld.gov.au 📌 **RANZCOG (Royal Australian and New Zealand College of Obstetricians and Gynaecologists)**: www.ranzcog.edu.au 📌 **Northern Health – Gynaecology Services**: www.nh.org.au 📌 **Your GP or healthcare provider**