63.6% of patients report pelvic functional complaints after oncologic pelvic surgery, but only 48.2% of them would seek help.

Multidomain pelvic functional complaints after oncologic pelvic surgery: prevalence, burden and help-seeking

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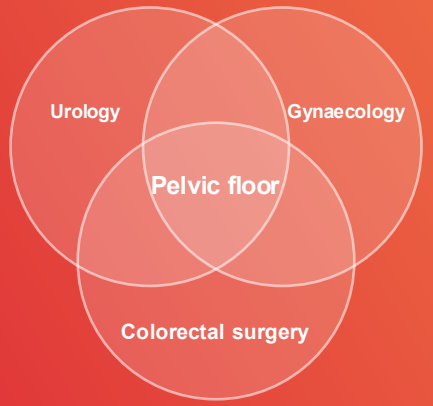
THREE SPECIALTIES, ONE PELVIC FLOOR



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BACKGROUND & AIM

Functional complaints after oncologic pelvic surgery are common, but are usually assessed within a single specialty, one organ system at a time.

Aim: to quantify prevalence, burden, multidomain distribution and help-seeking within the first postoperative year.

METHODS

- Prospective cohort, one university hospital
- Adults after oncologic pelvic surgery: urology, gynaecology, colorectal
- Questionnaire at 3, 6 and 12 months; six domains, burden 0–10
- Help-seeking: sought or intending to seek care
- Descriptive statistics

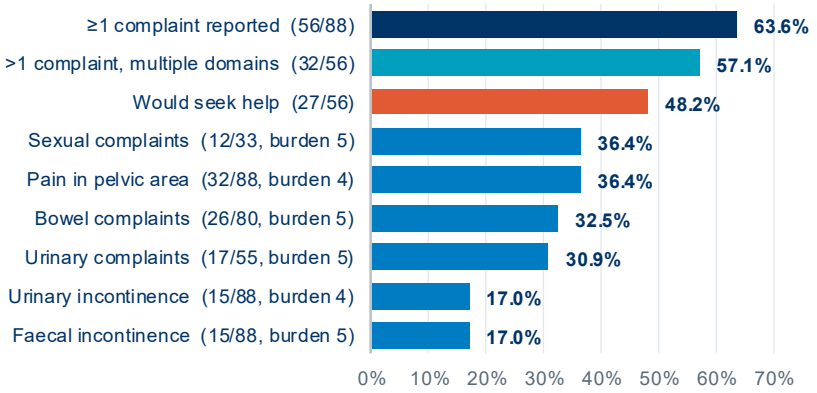
88
patients · 125 questionnaires

63.6%
reported ≥1 complaint

57.1%
of them in >1 domain

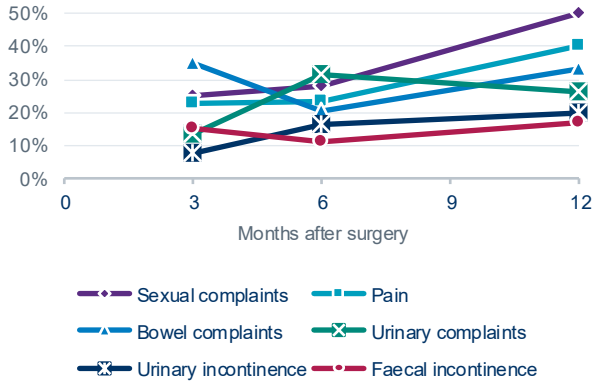
48.2%
would seek help

Prevalence and burden per domain (n=88)



% of patients with an applicable response; median burden (0–10) in brackets.

Complaints over time



Cross-sectional; overlapping patient subsets per time point.

CONCLUSION

Structured, cross-disciplinary assessment of pelvic floor function during follow-up is needed to identify unmet needs.

- Two in three patients report ≥1 complaint
- Fewer than half intend to seek help
- Complaints often span several domains
- They cross the borders of the operating specialty

Prospective cohort, Leiden University Medical Center · no conflicts of interest · no funding to declare