

Relationship between sexual sphere, cystocele and urethral prolapse

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INTRODUCTION

Urethral prolapse affects women of any age, but cystocele appears in more advanced ages.

Both disorders have a negative impact in the sexual sphere of our patients.

The aim of this study is to identify the factor affecting sexual sphere in patients with urethral prolapse with/without cystocele.

MATERIAL AND METHODS

Study design: Retrospective, observational.

Study period: 17/10/2000 - 15/04/2021

17 patients

Inclusion criteria: female adult patients who have undergone surgery for urethral prolapse.

Groups: **GF**: Feeling vaginal bulge; **GNF**: No bulge sensation.

Variables: Age at surgery, BMI, concomitant disorders and drug treatment, toxic habits, medical and surgical background, gynaeco-obstetric history; health status defined by the American Society of Anaesthesiologists (ASA) Physical Status Classification System, reason for consultation, time between diagnosis and surgery, functional results: SF-36 quality of life questionnaire, urinary incontinence, bulge sensation, bleeding, dyspareunia, urinary urgency and/or frequency.

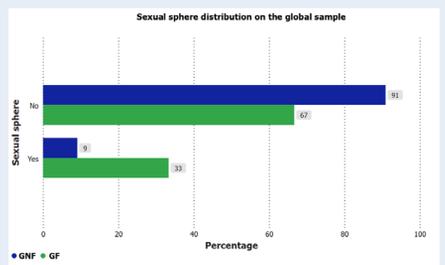
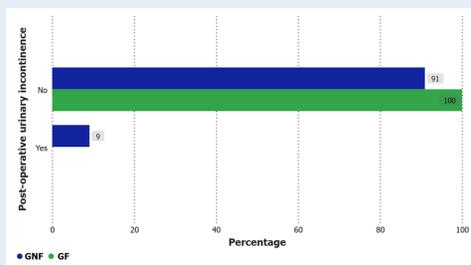
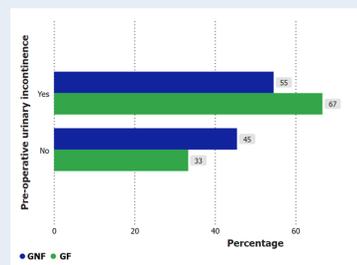
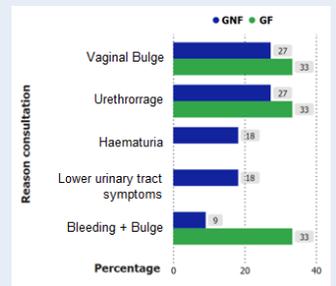
Statistics: Descriptive, hypothesis contrast and multivariate analysis (logistic regression).

RESULTS

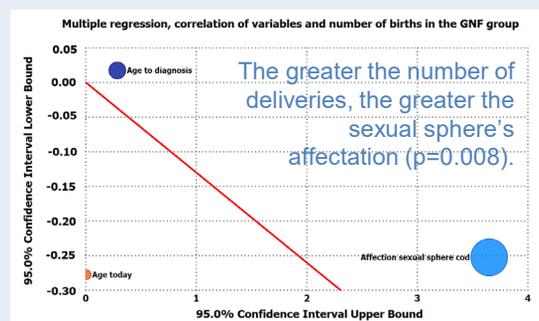
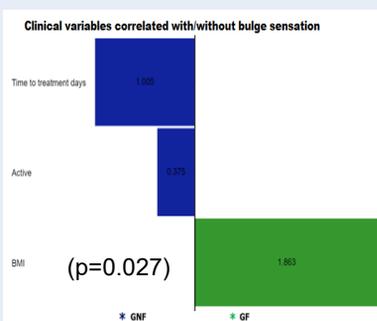
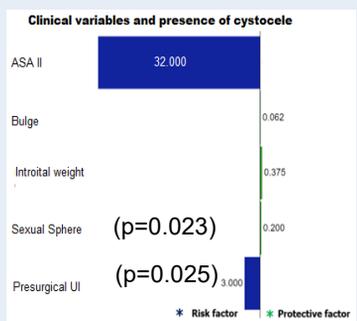
Mean age was 70.41 years. Mean BMI was 23.67, greater in GF (p= 0.027). Mean follow-up time was 231.58 days, without differences between groups. A higher frequency of depression and dyslipidaemia, as well as a higher ASA score, were found in patients in GF.

Urethral bleeding was the most common reason of consultation.

No relationship between ECOG score, concomitant disorders or treatments, toxic habits, pathology results or surgical technique's variables.



Multivariate analysis: Logistic regression and multiple regression.



CONCLUDING MESSAGE

The **affection of the sexual sphere** due to urethral prolapse is directly associated with concomitant **cystocele** and **urinary incontinence** before surgical correction of urethral prolapse.