

GYNAECOLOGY & OBSTETRICS UPDATE

Website for Doctors MarkMalak.com

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**HOSPITAL
DOCTOR**

AWARD

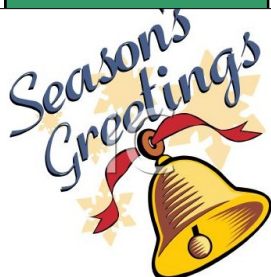
1st runner up

**UK best
Continence Team**

**Eastbourne
Urogynecology
Team**

M Malak, A Grimston,
J Andrews, N Lawton,
A Spirou, W Fletcher

Integrated management of pelvic floor disorders: Prolapse, urinary incontinence (1ry & recurrent), frequency, urgency and recurrent cystitis



The Daily Mail has corrected its wrong and confusing article published in August 2011 about continence surgery. The newspaper, having taken advice from a retired doctor, confused the successful use of tape for continence surgery (TVT) with using large volume mesh for prolapse (POP) surgery which is proven to be associated with serious complications [See Update Issue 107].

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My embarrassing bladder was fixed by a 'fishing line' implant

Site Web bing

This new article praises the TVT surgery and highlights the confusion

Both operations use mesh but with POP surgery, much larger amounts of the material are implanted in a different position. A third of patients experience complications, which include the mesh being rejected by the body, leading to it moving and parts of it being pushed out through the internal membranes, which can be painful. In contrast, the TVT operation is highly successful with few complications.

Mr Malak has already warned about the risks of using mesh in POP surgery. His opinion is that insertion of large artificial mesh in the vagina is un-physiological due to the large volume of mesh left in situ (some of them with six arms; see diagram) leading to considerable risks of intractable pain during intercourse, infection and erosion. The FDA has warned against these risks. It is however important to realize that even safe, effective operation e.g. TVT procedures [Mr Malak's results are 94% complete cure and 97% satisfaction rate] could be associated with low success rate and major complications if the operation is not done by a specialist with highly specialized pelvic surgical experience.

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tmmalak Mark Malak
FDA: Placement of mesh to repair pelvic organ prolapse is riskier than repairs with no clinical benefit. bit.ly/oLUINi via @addthis
5 Aug

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Transvaginal mesh placement for POP tied to adverse events

**OBG
MANAGEMENT**

Transvaginal mesh tied to more risks than other surgical approaches in pelvic organ prolapse surgery

The U.S. Food and Drug Administration has warned health care providers and patients that transvaginal surgical placement of mesh to repair pelvic organ prolapse (POP) may be riskier than other surgical approaches, with no greater clinical benefit.

