**Uterine Prolapse**

**Definition**

The word prolapse means “a falling out of place or slipping”. A uterine prolapse is when the uterus falls out of its normal place and slips causing a bulge in the vaginal wall. This is a place where it should not be. Uterine prolapse occurs when the pelvic floor muscles and ligaments that support the reproductive organs, become stretched and weakened.

Various treatment options are available depending on how severe the prolapse is and its effect on a woman’s activities of daily living.

**FAQ’s**

**What causes uterine prolapse?**

Common causes of uterine prolapse are:

- childbirth, especially repeated
- aging and the decreased production of estrogen
- obesity
- perineal trauma and/or lacerations occurring during the pushing and delivery stages
- poor physical condition
- occupations which demand heavy lifting
- conditions which cause increased pressure such as chronic cough, chronic constipation, tumors.

**What are the symptoms of Uterine Prolapse?**

Frequent signs and symptoms may include:

- Pain in the pelvic region
- A feeling of pressure or bulging sensation in your lower pelvis, especially after standing for a long period of time.
- Frequent and painful urination
- Pelvic pain during or after intercourse
- Backache that becomes worse when lifting heavy objects
- Frequent recurring urinary tract infections
- Difficulty in moving your bowels, constipation
How is uterine prolapse diagnosed?

Your doctor may perform a pelvic exam and ask you to bear down as if having a bowel movement. This action will help determine how far the uterus has slipped into your vagina. To check the strength of your pelvic muscles, your doctor may ask you to tighten (contract) them, as if you’re stopping the stream of urine.

You may fill out a form with questions pertaining to the pelvic organs that help your doctor assess how uterine prolapse affects you or you can take a pelvic health questionnaire now by clicking on my pelvic health assessment.

How is uterine prolapse treated?

Uterine prolapse is treated depending on the severity and its affect on your quality of life. Women with mild symptoms may be treated with physical therapy using Kegel exercises to strengthen the pelvic floor. Hormone therapy may be an option as well as devices such as a pessary - A pessary is a stiff ring inserted into the vagina which pushes up against the wall of the vagina to help support it and keep it in place.

Surgery is most effective for women who have not responded successfully to other treatments or the severity of the prolapsed warrants it. Discuss with your doctor whether surgery is right for you and what type is best for your individual needs.

How do I talk to my doctor about this problem?

Many women are embarrassed and do not want to initiate the conversation about uterine prolapse with their doctor. But remember that uterine prolapse is a common problem shared by many women and your healthcare provider is there to help. Here are some questions that you can ask:
What is the cause of my symptoms?
How is uterine prolapsed diagnosed?
What are the treatment options available to me?
What treatment approach do you recommend for me and my specific symptoms and quality of life?
What is the rate of recurrence?

Other Types of Pelvic Organ Prolapse

Cystocele - bulging of the bladder into the vaginal wall
Enterocele – bulging of the small intestine into the vaginal wall
Rectocele- bulging of the rectum into the vaginal wall
Urethrocele – bulging of the urethra into the vaginal wall

For more information about Uterine Prolapse or to find a provider for this women’s health issue, contact the Women’s Health Navigator, Trish Reggio at preggio@fmh.org

You can reach Trish at 240-215-1447 or ask Trish a healthcare question online. You will receive a response within 24 hours, Monday – Friday