

Cystocele Repair and Clinical Outcome

Haruo TAHARA, Yoshiyuki NABESHIMA, Aya OKADOME,
Asami ARIYOSHI and Tsuyoshi KANEOKA

*Department of Urology and Department of Obstetrics and Gynecology
School of Medicine, Fukuoka University*

Abstract: We review our clinical experience of a surgical repair in 10 cases with severe cystocele (grade III and IV) between 1991 and 1996. The initial 5 cases were treated with Burch's procedure and the recent 5 cases were treated using anterior colporrhaphy with bladder neck suspension. The average follow-up period was 20.4 months and the clinical results of the surgical repair were a complete cure (5), good (3), improved (1) and failed (1), respectively. Two cases, consisting of one improved and one failed case each, belonged to the group of Burch's procedure. No other factors directly influencing the clinical results could be found. We therefore consider that diabetes mellitus and/or prolapse uteri may predict a gradual deterioration of the cystocele even after a successful surgical repair.

Key words: Cystocele, Surgical repair, Clinical outcome, Pelvic organs prolapse