Surgical mesh itself not tied to increased complications

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(HealthDay)—Use of mesh is not independently associated with an increase in the rate of complications of pelvic organ prolapse repair, according to a study published in the August issue of *The Journal of Urology*.

Kai B. Dallas, M.D., from the Stanford University School of Medicine in California, and colleagues used data from the Office of Statewide Health Planning and Development to identify all women who underwent pelvic organ prolapse repair in California from 2005 to 2011 (110,329 women). Patient, surgical, and facility factors associated with repeat surgery for a complication due to mesh or recurrent pelvic organ prolapse were evaluated.

The researchers found that mesh was used in 16.2 percent of the repairs performed over the study period. In women who underwent mesh repair, the overall repeat surgery rate was higher (5.4 versus 4.3 percent). Mesh itself was not independently associated with repeat surgery, in multivariate modeling. However, repair at a facility where there was a greater propensity to use mesh was independently associated with repeat surgery (highest versus lowest mesh use quartile odds ratio, 1.55). Using mesh in 5 percent of anterior and 10 percent of anterior apical repairs was associated with the lowest risk of repeat surgery.

"Our findings demonstrate that mesh is not independently associated with an increase in the rate of complications of pelvic organ prolapse repair on a large scale," the authors write. "We present a model that supports judicious use of the product on the population level which balances the risk of complications against that of recurrent pelvic organ prolapse."

More information: Abstract/Full Text