

Risk for complications from mesh implant does not diminish

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patients who had mesh and a reintervention, 18.5 percent of the reinterventions were related to mesh-related complications.

"Even though transvaginal mesh has been removed from the market, the risk of mesh complications did not diminish over time and these women warrant close follow-up," the authors write. "Continued surveillance of mesh in POP repairs is essential to ensure safety for the women who have already been implanted."

More information: Abstract/Full Text (subscription or payment may be required)

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(HealthDay)—Continued surveillance after mesh use in pelvic organ prolapse (POP) repairs is necessary, according to a study published online Feb. 6 in *Obstetrics & Gynecology*.

Bilal Chughtai, M.D., from Weill Cornell Medical College-New York Presbyterian in New York City, and colleagues evaluated the longer-term safety and reintervention outcomes of mesh implants in POP repairs. The analysis included 54,194 www.women undergoing POP repairs (12,989 with mesh and 41,205 without mesh) in inpatient and outpatient surgical settings between 2008 and 2016 in New York state.

The researchers found that in the propensity score -matched 12,284 pairs of women, POP repair with mesh was associated with a higher risk for reintervention versus POP repair without transvaginal mesh (hazard ratio, 1.40). At five years, the estimated risk for undergoing a reintervention was 8.8 percent in the mesh group versus 6.3 percent in the nonmesh group. Among



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