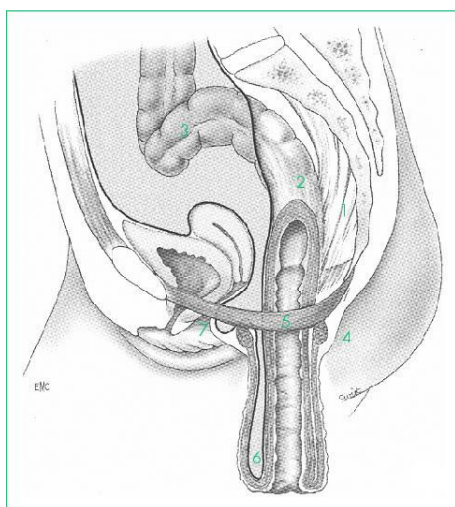


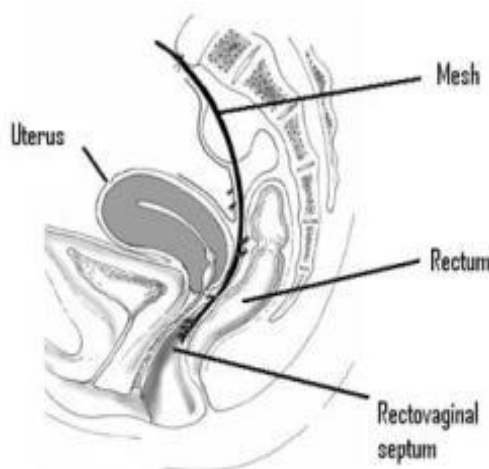
Laparoscopic Ventral Mesh Rectopexy (LAP VMR) or (LVMR)

Introduction: What does Laparoscopic Ventral Mesh Rectopexy mean?

This is a keyhole operation that hitches up the rectum and sometimes the vagina using sutures and mesh.



Before (external prolapse)



After

When is LVMR performed?

This operation is most commonly performed for patients with external rectal prolapse (that is when the rectum has turned itself out and hangs outside) or internal rectal prolapse (when the rectum has telescoped into itself but has remained within the body) causing obstructed defecation syndrome (ODS). Both of these conditions could also cause incontinence as the predominant symptom.

How are patients prepared for the operation?

You may have one or more of the following investigations to obtain more information and ensure the operation is right for you:

- (i) Flexible sigmoidoscopy/ Colonoscopy
- (ii) Defaecating proctogram
- (iii) Transit studies
- (iv) Anorectal physiology
- (v) Endoanal ultrasound.

Short Stay Surgery Patient Information

You will attend a pre-assessment appointment prior to your admission for surgery. This is to check that the anaesthetic will be safe for you and to carry out any further tests that are necessary. You will then usually come up to hospital on the morning of the operation.

What is the LVMR procedure?

You will be given an enema on the morning of surgery. The operation is performed under general anaesthetic by keyhole surgery. The surgeon opens up the space between the rectum and vagina; then opens up the peritoneum (the thin layer that lines our insides) alongside the rectum. By operating only in front of the rectum, the surgeon stays away from the nerves supplying the bowel and genitalia. A piece of mesh is stitched to the front of the rectum and this mesh is in turn secured to the sacrum (lower backbone) pulling the bowel up out of the pelvis and preventing it from telescoping down. This restores the rectum to its normal anatomical position.

How long does it take to recover?

You should expect to be in hospital for 24 - 48 hours after surgery. If your urinary catheter was left in after your operation, it will be removed in the morning and your drip will usually come down. You will be able to eat and drink as soon as you feel able. You will be discharged on laxatives to avoid constipation and straining in the first few weeks after surgery unless constipation was not your problem before the operation. You may be fit to drive or return to work after two weeks but should not do any lifting for at least six weeks.

What are the potential complications?

There are some complications which can happen after any operation. These include bleeding, infection and blood clots in the legs or lungs (Deep Vein Thrombosis/ Pulmonary Embolism).

Specific to LVMR there could be problems with sexual function, urinary problems and worsening of or failure to improve symptoms. Rarely, the mesh inserted could erode into the vagina or rectum.

On the whole, it is a safe operation and all the complications mentioned above are uncommon to rare.

Follow-up

You will be seen in clinic 6-8 weeks after the operation unless there is a need to see you earlier. Your subsequent follow-up will be determined by how well you recover and whether or not your symptoms have improved.

Short Stay Surgery Patient Information

What about my diet?

What you eat has a direct impact on your bowel motions and the amount of wind you produce. Try to avoid foods that may constipate you or cause increased wind. A high fibre diet, drinking plenty of water and taking regular exercise helps to produce a normal softer stool. Please ask for further information that you require.

Laxatives

You will be prescribed a laxative to take for the first week post-surgery.

Should I shower or bath afterwards?

You can do either.

When can I resume work and exercise?

You should expect to be off work for at least two weeks following your surgery. Exercise may be gently introduced after one week; this should be of a low impact type. More physical exercise and riding a bicycle may be gradually introduced from about a month to six weeks onwards.

What about sexual relations?

You should avoid sexual intercourse for six weeks following your LVMR procedure.

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