

Community Gynaecology Service

Vaginal Pessaries

What is a Vaginal Pessary?

A vaginal pessary is a plastic device which can be inserted in the vagina to help support your uterus (womb), vagina, bladder or rectum.

Why do I need a pessary?

The pessary is most often used for ‘prolapse’ of the vagina and/or uterus. A pessary can help if you have a ‘cystocele’ (when your bladder drops down into the vagina) and in certain cases if you have a ‘rectocele’ (when your rectum drops down into your vagina). This option helps to avoid surgery and is suitable for patients who wish to have more children, those who have other circumstances which prevent them from having surgery or those who would wish to avoid surgery.




First and second degree prolapse are usually managed with a ring pessary. The Gellhorn pessary is designed to manage severe uterine or vaginal prolapse. This pessary offers stronger support, but is a little more difficult to remove than a ring pessary. A Shelf pessary may be useful if a patient has had a hysterectomy

How does a vaginal pessary work?

The pessary is placed inside the vagina. It will stretch its walls and hold the soft tissues up so as to prevent the womb or the vaginal walls from bulging out into the vagina.

What types of vaginal pessaries are available?

The three most common types of pessaries that are used are the ring, gellhorn and shelf

Ring Pessary	Gellhorn Pessary	Shelf Pessary
		
<ul style="list-style-type: none">• Round and soft• Do not prevent sexual intercourse	<ul style="list-style-type: none">• Soft• Has a knob attached• Sexual intercourse will not be possible	<ul style="list-style-type: none">• Saucer shape with a knob underneath• Firm• Sexual intercourse will not be possible

They all come in different sizes and it may take a few attempts before the correct size is found.

Which type of pessary will suit me?

At first, a ring pessary is tried. If your pelvic floor muscles are not strong enough to hold the ring in place, other types will then be tried.

What happened after the pessary has been fitted?

The doctor will ask you to test the pessary by taking short walk to see if there is any discomfort or if the pessary slips.

You may be advised to go to the toilet, to make sure it does not affect you in passing urine. If there are any problems then a smaller or larger one will be fitted accordingly

What about follow up?

Initially your pessary will be replaced every six months. At this stage your prolapse can be re-assessed too. Your doctor will go through any concerns or changes with you.

What are the risks?

Vaginal discharge: You may get more vaginal discharge than normal which can be odorous. There is medication available to help this but good hygiene is the best treatment.

Ulceration: The pessary can occasionally chafe the vaginal skin and cause an ulcer or a raw area. If the pessary is left in place despite the ulcer, the ulcer can grow which could lead to trauma to the bladder or rectum that could be serious. Ulcers can be detected when changing the pessary through a speculum examination. If an ulcer is found it can be treated using oestrogen cream and then re-examined a few week later when a new pessary can be replaced if the ulcer has healed.

Bleeding: Sometimes you can bleed if there is an ulcer in the vagina. It may be necessary to rule out anything sinister in the uterus, by an ultrasound scan or taking a sample of the lining of the womb.

Moved or slipped pessary: occasionally the pessary is too small or the prolapse may get worse. Sometimes the pelvic floor muscles are not strong enough; in which case surgery may be a better option.

Difficult removal: Sometimes it can be difficult to remove and change the pessary which may lead to you having the procedure under anaesthetic.

If you have any problems after having a pessary fitted with us please call 01727823111.