

Prolapse Management

Service User Information Leaflet

Produced by: Pelvic Health Physiotherapy Service

Date of issue: Sep 2020 Review Date: Sep 2022

NHS Fife provides accessible communication in a variety of formats including for people who are speakers of community languages, who require Easy Read versions, who speak BSL, read Braille or use Audio formats.

NHS Fife SMS text service number 07805800005 is available for people who have a hearing or speech impairment.

To find out more about accessible formats phone 01592 729130 or contact: fife.equalityandhumanrights@nhs.scot.

What is a prolapse?

Prolapse is a change in the vagina, where one, or a few, of the pelvic organs moves down into the vagina. The prolapse can be felt as 'something there', or can be felt bulging inside or outside of the vagina.

Prolapse is very common, almost half of all women will have prolapse at some point in their lives

Sometimes the bulge is uncomfortable, and some discomfort can also be felt in the lower tummy.

Quite often there is no discomfort at all but patients may report difficulty fully emptying bowels or bladder.

It is common for the prolapse to be troublesome on some days and not at all on others. It can usually be more noticeable towards the end of the day.

What causes a prolapse?

- Childbirth
- Heavy or repeated lifting
- Being overweight
- Constipation
- Constant cough due to smoking or asthma
- Menopause changes
- Family history
- Age
- Previous pelvic surgery such as a hysterectomy

Will my prolapse go away?

There is good evidence that if you follow the advice in this leaflet you will see improvement in your symptoms. (Supporting research evidence: Poppy Trial, The Lancet, March 2014)

Sometimes the prolapse is hardly noticeable, but it is wise to keep following this advice long term.

What can I do to help?

Pelvic floor exercises. Your physiotherapist will teach exercises that help to support the bladder, bowel and womb.

'The Knack'. Try to tighten the pelvic floor muscles if you need to cough, sneeze or lift.

Manage constipation. Make sure you have enough fluid and fibre in your diet. Avoid straining on the toilet, ask your physiotherapist for ways to avoid this.

If overweight, lose weight . Try to reduce portion sizes to start with or get advice from your doctor.

Avoid heavy or repeated lifting where possible. If you have to lift, try splitting the load into lighter portions e.g. three shopping bags instead of one.

Control your coughing. Now is a good time to stop smoking.

Pace activities. Break up activities into small chunks, have time off your feet in between. Pushing, pulling or standing for too long should be avoided.

Sex and prolapse

Having sex is safe and will not cause damage to the prolapse. Find positions that are comfortable and consider lubricant if the vagina is dry or penetration is uncomfortable.

What else can be done for my prolapse?

Pessaries. A pessary is a plastic or silicon device worn inside the vagina, it helps to support the pelvic organs and keep them in place.

Surgery. If necessary your physiotherapist can refer you to a doctor who will talk to you about the risks and possible benefits of surgery.

Drugs. There are no medicines used to treat prolapse.

Further information

[POGP pelvic organ prolapse physiotherapy guide for women](#)