Anterior and posterior vaginal repair

What is anterior and posterior vaginal repair?

The muscles of your pelvis and the sides of the vagina help to hold the bladder and rectum in place. The front wall (anterior) of the vagina supports the bladder and the urethra while the back wall (posterior) supports the rectum.

If the muscles or sides of the vagina become loose or less elastic, the bladder and/or rectum can bulge into the vagina (prolapse). This may cause bladder and urinary problems – such as leaking urine or a frequent urge to urinate. It may also cause difficulty in having a bowel movement (constipation).

Incision(s) are made into the anterior and/or posterior vaginal wall to tighten the muscles to better support the rectum and bladder.

What causes this?

There are many causes. These include:

- pregnancy
- labour and childbirth
- aging
- obesity
- respiratory problems with long lasting cough
- constipation

Pain

After surgery, you may experience mild cramps/pain and pressure. Ways to relieve this pain include:

- taking your pain medication as prescribed by your doctor
- walking and moving around with frequent rest periods
- applying heat such as using a heating pad, heat pack or warm blanket
- doing deep breathing and relaxation exercises
Bleeding

You may have some irregular vaginal bleeding/spotting or discharge after surgery for 6 to 12 weeks. If you are still getting your periods, it can take up to a few months before it returns to normal.

Bowel care

Regular bowel function will help with your recovery and pain. Lighter meals are a good option for the first 2 to 3 days after your surgery. To help prevent constipation, drink plenty of fluids, increase fiber with fruits, vegetables and whole grains. If you are taking narcotic such as Tylenol 3 pain medication, you may need to take a stool softener.

Personal care

It is important to avoid baths, swimming, using tampons or having intercourse until advised by your doctor. This is usually until your follow up appointment which is about 6 weeks after surgery.

Activity

• No heavy lifting greater than 5 kg (11 lbs) or strenuous exercise for 6 weeks. This includes no vacuuming, laundry and lifting your child.
• Gradually increase your daily activities by doing light house duties and walking. Resting when needed.
• You may drive when it is no longer uncomfortable to sit.

Follow-up appointment

You will be given information about a follow-up appointment before you go home.

To make sure your bladder is working well, you will need to urinate (pee) before going home.