Sexual Function in Women after Urinary Incontinence and/or Pelvic Organ Prolapse Surgery

Name

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The pelvic organ prolapse (POP) surgical problems are increasing among women. The number of women suffering from pelvic organ prolapse (POP) will increase by 50% in the future. Celik et al. (2014) researched POP and found that about 35% of women around the world undergo prolapse surgical management every year. To manage prolapse, it is highly recommended to utilize durable procedures with low morbidity. This is because it brings in problems such as arousal disorders of desire and orgasm. Surgical and non-surgical modalities are both methods available to treat pelvic organ prolapse (POP). However, according to Celik et al. (2014), abdominal sacrocolpopexy (ASC) and anterior vaginal prolapse are considered the standard gold treatment for vaginal vault prolapse. The authors believe that ASC is the best form of treatment since it was 80% successful. Celik et al. (2014) considered the sample of women who underwent POP surgery, women who underwent UI surgery, and women who underwent UI and POP surgery. A total of 116 patients were considered for the study.

There was a high significant difference between uterine prolapse incidence and surgery group. Urinary incontinence and POP are hidden problems affecting women. The women who have undergone UI have shown improvement in their sexual life. In fact, they showed positive quality life too. The evaluation done via BFLUTS reveals that there was a decrease in urinary symptoms and increase in quality of life (Celik et al., 2014). The women on the POP did not show any improvement in sexual life within six months. However, the women in UI and UI + POP group showed high sexual performance. After successful completion of the study, approximately 85% patients completed the PISQ to determine their behavioral pattern. The result
indicated that more than 90% realized their problem although the belief and perception affected treatment process.

Reliability is a way of getting quality of measurement or procedures used in collecting data in research. For a research data to be considered reliable, it must show some percentage of correlation between results. The article “Sexual function in women after urinary incontinence and pelvic organ prolapse surgery” contains reliable results. The type of reliable is inter-rater agreement. Leung (2015) asserts that inter-rater reliability gives a score on the homogeneity the score. For example, the authors used the Statistical Package for the Social Science version 16.0. This gives the relationship between variables regarding percentage, means, standard deviation, and chi-square. According to Leung (2015), the reliability is the degree to which an assessment tool produces a stable and consistent result. The statistics that the reader goes through are gathered from different sources. Thus, the results should show the relationship between variables or concepts. For example, the results from the research show that the proportion of women with POP is (p<0.05). The significance degree of urinary incontinence for POP surgery, UI surgery, and UI+POP is 0.017. This reveals that there is a high correlation between the variables.

Validity is an indication of the clarity or the soundness of results. Validity is when the results represent claims. Koo and Li (2016) assert that validity refers to how well a test measures what is purported to examine. Validity also requires results to be consistent with other findings. The type of validity in the article is content validity. Content validity occurs when the researchers use the experiment to cover the subject under study. This includes measuring adequate sample from the targeted population. When a test has been reduced severally, a researcher should be in apposition to confirm that the results represent what he/she wants.
The strength of the article is that it uses tables and graphs to present statistical findings. For example, presenting group 1, 2, and 3 in a bar chart shows a clear comparison between the preoperative and 6months postoperative among the groups. The tables also show the mean score among the group, which is critical in reflecting the relationship between behavioral-emotive, physical and partner-related in determining PISQ. The weakness of the article is that the researchers did not spend adequate time to examine the behavior of women. That is, six months was short for women to fully discover the surgery and function sexually. The researchers ought to establish a follow-up going beyond six months. In every aspect of life, there must be a corresponding weakness or strength in a given project that is also seen in qualitative and quantitative research. However, choosing one methodology does not give the actual corresponding result of a given aspect and deprives the researcher’s benefits of building strength on the research. Although qualitative and quantitative methods are different and considered to be having strengths and weakness, it does not make the result deviate from the expected behavior or results. One approach cannot overrule the other. For examples, after the surgery, the doctors follow up to six months.

The article “Quality of life after Uphold Vaginal Support System surgery for apical pelvic organ prolapse—A prospective multicenter study” examines the quality of life women pass through after the operation of pelvic organ prolapse. The study considered a sample population of 207 women having the symptoms of apical prolapse. The nurses followed the women’s sexual life after 12 months to determine if they are making progress or not. They were assessed through PFDI-20 and PFIQ-7 and PISQ-12. Rahkola-Soisalo et al. (2012) found that many women the experienced an overall improvement of the quality of life and sexual
experience after the postoperative time. The frequency of the dyspareunia decreased after postoperative times. However, the authors noticed that sexual function deteriorated after one year. Some of the factors contributing to low sexual life include behavioral-emotive domain and physical domain. Rahkola-Soisalo et al. (2017) conclude that apical prolapse repair improves the quality of life among women. However, it affects the overall women’s’ sexual life.

In conclusion, it became difficult to fully conclude that surgery for pelvic organ prolapse affected sexual functions in women. Both Rahkola-Soisalo et al. (2017) and Celik et al. (2014) agree that apical prolapse repair improves the quality of life. However, after six months, Celik et al. (2014) found that during the postoperative time, women had improved their sexual behavior. On the contrary, Rahkola-Soisalo et al. (2017) noted that after 12 months, the sexual behavior among women deteriorated after apical prolapse repair. The article is relevant to the clinical practice. This is because the clinicians can understand the importance of providing cancelling to the victims of POP surgery in relations to their sexual functions and adaptability. Also, the women can have the ability to identify the urinary tract symptoms hence seeking medication.
References


