

Technology, Talk and Taboos

The da Vinci System is helping counter women's pelvic prolapse problems

BY CARLA CARWILE

Television's Dr. Oz has called *pelvic organ prolapse* one of the "last taboo" topics in gynecology, even though nearly half of all women will experience the problem in their lifetimes. Thanks to honest talk and new technology, metro Denver women have a powerful option when it comes to treatment.

In the hands of urologist Diane Hartman, M.D., a fine-weave mesh fabric and the precise controls of the da Vinci Surgical System can mean the end of a health problem that plagues many women.

The condition—pelvic organ prolapse—can be the result of childbearing, hysterectomy, weight gain, genetic



Diane Hartman, M.D.

or other factors. The symptoms may include bulging at the vagina, sexual dysfunction, incontinence and more. About 120,000 U.S. women require corrective surgery—called sacrocolpopexy—each year. This procedure enables the surgeon to reposition and permanently secure the “fallen” vagina, bladder, uterus or small intestine.

NEW TECHNOLOGY MEANS A FASTER RECOVERY

Where traditional sacrocolpopexy required a relatively long incision across the lower abdomen, today’s minimally invasive approach calls for a few small entry points for instrumentation.

“The da Vinci provides exceptional visualization, including 3-D imaging, and the anatomy is beautiful,” Hartman explains. “This significantly enhances a surgeon’s precision, which is important, given the placement of the mesh and the amount of sewing required to secure it. We’re also seeing really good outcomes, with less recovery time, lower recurrence rates and reduced hospital stays.”

For most women, the procedure brings a rapid return to life the way it was before the prolapse symptoms started. Such was certainly the case for Denver metro area women Kathy Sakurada, 61, and Mona Chancellor, 73.

And for both, the return to normal began with an honest conversation.

SPREADING THE WORD

“Oh, heavens,” begins Kathy Sakurada. “I put up with it for close to eight years. I’m a retired physical education teacher, and teaching on cement floors for 20-some years was certainly a factor. But I also had two children.”

Sakurada continues, “To be honest, I didn’t quite know what I was dealing with. I had lots of pressure in my lower abdomen. I couldn’t sit or stand very long. It was difficult to exercise. And there was some incontinence.

“Finally, I said to myself, ‘I’m too young to live like this for the rest of my life,’ and I talked with my personal physician, who recommended Dr. Hartman.

“When she examined me, she confirmed that both my bladder and vagina were really sagging. She felt like I was a strong candidate for the da Vinci procedure. She also explained the advantages it offered over the older ‘sling’ surgery, and how the mesh used meant not having to have the surgery redone.”

Sakurada, who has had multiple surgeries for breast cancer and other conditions, calls this “the easiest procedure by far. I had it at 1 p.m. one day and was out of the hospital 23 hours later. And I felt better instantly ... I felt like a new person.”

As a woman who loves to swim, hike, walk, garden and work out, Sakurada relished being able to return to an active life.

“I’ve talked with women since then about it, because I want them to know there are options out there. They don’t need to suffer. They just need to talk with a specialist.”

STOP THE SUFFERING

Mona Chancellor was just two weeks postsurgery when she shared her experience. For her, the prolapse problem developed slowly over nearly two years. “I kept thinking it would go away,” she recaps. “But in the last six months, it grew increasingly worse. I had a vaginal prolapse, which caused the small intestine to drop down and protrude through the vagina. There was a dull ache and some abdominal


“Finally, I said to myself, ‘I’m too young to live like this for the rest of my life.’”

pain, but when the bulge appeared, I was fearful the little lump was cancer.”

When a physical examination determined the real cause of the protrusion and the da Vinci procedure was offered as a surgical correction, Chancellor agreed immediately.

Hartman performed the procedure at St. Anthony Central Hospital, just prior to the move to the new Lakewood campus.

“I was only there overnight,” she states. “I immediately felt like myself. There was very little in the way of pain—I just took ibuprofen. The only restriction on activity was not to lift anything over 10 pounds for a few weeks.”

Chancellor summarizes, “I know there are women suffering in silence with this. It is embarrassing and uncomfortable. It’s odd. But do talk with your doctor if you’re having a problem. I am so glad I did.” 

ONLINE

You Don’t Have to Suffer in Silence

To learn more about the da Vinci Surgical System procedure for pelvic prolapse, visit stanthonyhosp.org/gyn-surgery.

