

UTERINE PROLAPSE IS A DELICATE PROBLEM FOR WOMEN

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Uterine prolapse is a variant of pelvic floor dysfunction. Every third patient experiences this condition, which in half of the cases is accompanied by urinary incontinence. Recently, there has been a “rejuvenation” of the disease. Not only women who have given birth can experience uterine prolapse, but also young girls, since the cause of the development of this condition may be the characteristics of the connective tissue.

Key words: *uterine prolapse, urinary incontinence, vaginal pain, birth of large children, pessary*

Often, the realization of this predisposition is facilitated by injury to the pelvic floor muscles (childbirth, heavy physical activity, constipation).

The pathology is caused by a number of predisposing and provoking factors, which can occur either in isolation or in combination with each other.

Most often, the predisposing causes of uterine prolapse are:

age-related decrease in the elasticity of ligamentous structures;

birth of large children;

pelvic floor injury during childbirth;

hereditary characteristics of connective tissue (in particular dysplasia);

heavy physical activity, which is accompanied by an excessive increase in intra-abdominal pressure.

Provoking factors can also be:

excess body weight;

sedentary lifestyle;

smoking;

persistent cough.

As a rule, prolapse develops due to the overlap of predisposing (for example, family history) and provoking (increased intra-abdominal pressure, perineal trauma) factors. During menopause, when estrogen levels drop critically, prolapse progression is often noted. In the initial stages of prolapse and prolapse of the uterus or vaginal walls, symptoms may not appear at all or appear very little for a woman. In the early stages, there is no pain, so you may not notice the presence of the disease. The menstrual period in this case remains normal, there are no disruptions. The first signs of prolapse of the vaginal walls or uterine prolapse may appear during intimacy, the woman may feel discomfort and may experience pain. When the disease begins to progress, symptoms appear:

- heaviness in the vaginal area;
- painful sensations when moving;
- sensation of a foreign body in the vagina;
- protrusion of the genitals beyond the vulvar ring;
- problems with urination, urinary incontinence;
- painful sexual intercourse;
- chronic aching pain in the lower back;
- vaginal pain;
- bloody discharge.

If there are symptoms of uterine prolapse, as well as complications that arise, only surgical treatment will be effective. Conservative therapy is possible only if there are absolute contraindications to surgery. In this case, the woman is recommended to wear a special device - a pessary, as well as a hysterophore - a bandage designed to support organs.

Currently, surgical and conservative treatment methods are used. Conservative treatment methods: exercise therapy, physiotherapy of the pelvic floor muscles, wearing a special vaginal pessary (the pessary helps maintain the uterus in its natural position). Conservative treatment tactics are used only in the early stages of uterine prolapse and if surgical treatment is performed

A miscarriage causes a number of problems in women. These include urinary incontinence, feeling and pain as if there is a foreign body in the vagina, constipation. maintaining intervals, not lifting heavy loads (because women's pelvic floor muscles are not as strong as men's), preventing constipation, regular Kegel exercises, changing a passive lifestyle and of course it is necessary to undergo a gynecologist examination twice a year.

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