

Vaginal support pessaries for pelvic organ prolapse

Information for patients

What is a vaginal support pessary?

A vaginal support pessary is a soft, removable device made from silicone or vinyl, which is inserted into your vagina. It helps to support the areas that are affected by pelvic organ prolapse.

What is a pelvic organ prolapse?

The pelvic organs are your bladder, bowel and uterus. A pelvic organ prolapse is where one or more of your pelvic organs slip down out of their normal position within your pelvis, causing a bulge in your vagina. It can be your uterus (womb), bowel, bladder or top of your vagina.

What causes or contributes to the appearance of a pelvic organ prolapse?

There are many contributing factors that can lead to developing a pelvic organ prolapse such as:

- ageing process
- pregnancy and childbirth
- obesity
- constipation
- heavy lifting
- hormonal changes / menopause
- chronic long term cough
- hysterectomy
- pelvic mass
- conditions which cause weakening of pelvic floor muscles and tissues eg. multiple sclerosis.

Why do I need a vaginal support pessary?

Pelvic organ prolapse can contribute to symptoms that have an impact on everyday life, such as:

- a soft bulge, which can be felt or seen inside or outside of your vagina
- a heavy, dragging sensation in your vagina
- voiding dysfunction (problems weeing)
- urinary incontinence
- incomplete bowel emptying
- constipation
- dyspareunia (difficult or painful intercourse)
- lower abdominal pain, back ache or groin ache.

What are the benefits?

Vaginal support pessaries offer a low risk conservative treatment for those patients who are not suitable or do not want to have a surgical correction of prolapse. Although pessaries do not actually treat a prolapse, symptoms can be managed effectively. It will be your decision if you wish to try one.

What types of pessaries are available?

There are several different types of vaginal support pessaries of various makes, shapes and sizes. Commonly used pessaries include:

- ring (most common)
- ring with support
- Gellhorn (short / long stem)
- incontinence ring
- shelf
- cube
- donut.



Figure 1: Shelf pessary



Figure 2: Ring with support Cube



Figure 3: Ring without support Gellhorn

How is a vaginal support pessary fitted?

A vaginal examination is performed to estimate the size and type of pessary required. It may take more than one fitting to find the correct one. The pessary is placed into your vagina and adjusted to sit behind your pubic bone. There may be some discomfort but it should not be painful and will settle quickly.

To prevent discharge and ulceration, we often recommend the use of vaginal oestrogen (cream, tablets or a ring). This can also help to improve bladder function. Your doctor or nurse will discuss this with you further.

What are the possible side effects?

Most people find the pessary very comfortable and are not aware that it is there. Occasionally there can be problems or complications. These include:

- slipped or moved pessary
- vaginal discharge, which can smell
- friction inside your vagina caused by the pessary rubbing
- vaginal bleeding can occur, usually due to friction or ulceration.
- If bleeding occurs and you are post-menopausal with no evidence of ulceration and have not had a hysterectomy, your GP will refer you to the post-menopausal bleeding clinic
- irritation
- difficulty removing the pessary
- stress incontinence
- urine infection.

When will I have a follow up?

Depending on the type of pessary used and your ability to handle the pessary, you may be taught to manage it yourself. This can be done at a time and frequency to suit you. If this is not possible, a doctor or nurse will need to check and replace the pessary, usually every 6 months. This is done either at your GP practice or in the hospital outpatient department, depending on the pessary type and the expertise available.

You may require follow up sooner if there is more heavy discharge and you are unable to remove the pessary yourself. In some women, the pessary can be left a little longer (9-12 months maximum). Your doctor can discuss whether this may be suitable for you.

What happens at the follow up appointment?

The pessary will be removed and a vaginal examination carried out. This is done using a speculum (like when having a smear) to enable the tissues inside your vagina to be looked at for signs of friction or ulceration. An internal examination will also be performed before the pessary is re-inserted.

You will be given the opportunity to raise any other questions or concerns you may have.

How can I help myself?

Do

- ✓ regular pelvic floor exercises.

Avoid

- ✗ weight gain – try to reduce weight if necessary
- ✗ heavy lifting, pulling or straining
- ✗ constipation.

Contact us

If you have any questions or need further information please contact the Urogynaecology CNS:

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