

Clinical and cost-effectiveness of pessary self-management versus clinic-based care for pelvic organ prolapse in women: the TOPSY RCT with process evaluation

Carol Bugge,^{1*} Suzanne Hagen,² Andrew Elders,²
Helen Mason,³ Kirsteen Goodman,²
Melanie Dembinsky,⁴ Lynn Melone,² Catherine Best,⁵
Sarkis Manoukian,³ Lucy Dwyer,^{6,7} Aethele Khunda,⁸
Margaret Graham,⁴ Wael Agur,⁹ Suzanne Breeman,¹⁰
Jane Culverhouse,¹¹ Angela Forrest,¹¹ Mark Forrest,¹⁰
Karen Guerrero,¹² Christine Hemming,¹³
Doreen McClurg,² John Norrie,¹⁴ Raneer Thakar¹⁵ and
Rohna Kearney^{6,7}

¹School of Health and Life Sciences, Glasgow Caledonian University, Glasgow, UK

²Nursing, Midwifery and Allied Health Professions (NMAHP) Research Unit, Glasgow Caledonian University, Glasgow, UK

³Yunus Centre for Social Business and Health, Glasgow Caledonian University, Glasgow, UK

⁴Health Sciences & Sport, University of Stirling, Stirling, UK

⁵Nursing, Midwifery and Allied Health Professions (NMAHP) Research Unit, Stirling, UK

⁶The Warrell Unit, Saint Mary's Hospital, Manchester University Hospitals NHS Foundation Trust, Manchester Academic Health Science Centre, Manchester, UK

⁷Faculty of Biology, Medicine and Health, School of Medical Sciences, University of Manchester, Manchester, UK

⁸South Tees Hospitals NHS Foundation Trust, James Cook University Hospital, Middlesbrough, UK

⁹School of Medicine, Dentistry and Nursing, NHS Ayrshire & Arran, University of Glasgow, Kilmarnock, UK

¹⁰Health Services Research Unit (HSRU), University of Aberdeen, Aberdeen, UK

¹¹Patient and public representative of the TOPSY trial, UK

¹²Department of Urogynaecology, NHS Greater Glasgow and Clyde, Glasgow, UK

¹³Grampian University Hospitals NHS Trust, Aberdeen Maternity Hospital and Aberdeen Royal Infirmary, Aberdeen, UK

¹⁴Usher Institute of Population Health Sciences and Informatics, College of Medicine and Veterinary Medicine, University of Edinburgh, Edinburgh, UK

¹⁵Croydon Health Services NHS Trust, Croydon University Hospital, Croydon, UK

*Corresponding author Carol.Bugge@gcu.ac.uk

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Plain language summary

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Plain language summary

Pelvic organ prolapse is a common and distressing condition experienced by large numbers of women. Prolapse is when the organs that are usually in the pelvis drop down into the vagina. Women experience a feeling of something coming down into the vagina, along with bowel, bladder and sexual problems.

One possible treatment is a vaginal pessary. The pessary is a device that is inserted into the vagina and holds the pelvic organs back in their usual place. Women who use a vaginal pessary usually come back to clinic every 6 months to have their pessary removed and replaced; this is called clinic-based care. However, it is possible for a woman to look after the pessary herself; this is called self-management.

This study compared self-management with clinic-based care. Three hundred and forty women with prolapse took part; 171 received clinic-based care and 169 undertook self-management. Each woman had an equal chance of being in either group. Women in the self-management group received a 30-minute teaching appointment, an information leaflet, a 2-week follow-up telephone call and a telephone number for their local centre. Women in the clinic-based care group returned to clinic as advised by the treating healthcare professional.

Self-management was found to be acceptable. Women self-managed their pessary in ways that suited their lifestyle. After 18 months, there was no difference between the groups in women's quality of life. Women in the self-management group experienced fewer pessary complications than women who received clinic-based care. Self-management costs less to deliver than clinic-based care.

In summary, self-management did not improve women's quality of life more than clinic-based care, but it did lead to women experiencing fewer complications and cost less to deliver in the NHS. The findings support self-management as a treatment pathway for women using a pessary for prolapse.

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