

Pelvic Floor Society statement—use of mesh surgeries for constipation and rectal prolapse

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In light of ongoing concerns by the media and the public surrounding the use of mesh in women with pelvic organ prolapse and urinary incontinence, the Pelvic Floor Society has issued a consensus statement addressing the use of mesh for the treatment of constipation and rectal prolapse (via a surgical procedure called ventral mesh rectopexy, or VMR). The Statement is published in *Colorectal Disease*.

Mesh is a synthetic or biological material used to offer extra internal support. In a small number of patients, such meshes may cause problems, but according to the Pelvic Floor Society, evidence suggests that mesh-related complications for VMR are far lower than those seen in transvaginal procedures. The Society's statement addresses proper training and accreditation regarding VMR, as well as recommendations on tracking and recording complications and providing detailed consent forms and information booklets to patients.

"This important paper presents the evidence to support the use of Ventral Mesh Rectopexy in the treatment of constipation and rectal prolapse. It should reassure the profession and public that we take potential mesh complications very seriously," said Andrew Williams, Chair of the Pelvic Floor Society. "We are doing everything possible to improve education, provide detailed patient information, and record any complications to better understand the outcomes following this surgery."

More information: *Colorectal Disease*, [DOI: 10.1111/codi.13893](https://doi.org/10.1111/codi.13893)

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