

Self-cut mesh noninferior for pelvic organ prolapse procedure

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Using the same titanium-coated polypropylene mesh, the surgical

success rate with self-cut mesh is noninferior to that with a commercial mesh kit for the transvaginal treatment of severe pelvic organ prolapse (POP), according to a study published online Sept. 16 in *JAMA Network Open*.

Juan Chen, M.D., Ph.D., from the Chinese Academy of Medical Science and Peking Union Medical College in Beijing, and colleagues conducted a [randomized clinical trial](#) to assess the one-year effectiveness and safety of self-cut titanium-coated polypropylene mesh (169 [patients](#)) versus a precut commercial mesh kit (167 patients) for the transvaginal surgical treatment of women with severe symptomatic POP.

The researchers found that 95.9 percent in the self-cut mesh group met the definition of surgical success, which was noninferior to the surgical success rate achieved in the mesh-kit group (87.4 percent). There was no significant difference in the frequency of Clavien-Dindo grade 1 to 3 perioperative complications (7.2 percent in the self-cut mesh group versus 12.4 percent in the mesh-kit group). At one year, vaginal mesh exposure rates were similar (2.4 percent in the self-cut mesh group versus 4.8 percent in the mesh-kit group). Finally, there was a savings of \$2,481.00 (40.4 percent) with the use of self-cut mesh when comparing median total hospitalization costs.

"Self-cut [mesh](#) procedures may be advantageous for some patients in countries with low and middle income," the authors write.

More information: Juan Chen et al, Effectiveness of Self-cut vs Mesh-Kit Titanium-Coated Polypropylene Mesh for Transvaginal Treatment of Severe Pelvic Organ Prolapse, *JAMA Network Open* (2022). [DOI: 10.1001/jamanetworkopen.2022.31869](#)

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