**Update on the use of vaginal mesh for urinary incontinence and prolapse.**

There has recently been a lot of publicity over mesh products which are used for the treatment of stress urinary incontinence and vaginal prolapse. This has also caused unnecessary anxiety for many patients and confusion about the availability of these products.

In Australia the Therapeutic Goods Administration (TGA) is the organisation which approves and registers surgical devices and medications. Late last year the TGA held a further review into the use of transvaginal mesh products and decided the benefits obtained with use of mesh for the treatment of pelvic organ prolapse did not outweigh the possible risks to patients. These prolapse mesh products have therefore had their registration withdrawn effective from 4 January this year. Medsafe, the equivalent organisation in New Zealand is presently conducting a similar process.

It is very important to note that mesh used for incontinence (mid-urethral slings) are still available to Australian patients. These slings have been shown in thousands of scientific articles over many years, to be the most effective surgical procedure with the lowest complication rate of any operation for stress urinary incontinence. The TGA recognises this and has retained these products on the Register of Therapeutic Goods with more detailed product information.

There is also a newer type of mid-urethral sling known as a single-incision or mini-sling. Internationally there is increasing data on the single-incision slings plus several ongoing trials which include hospitals in Australia. However, due largely to company takeovers and product removals, most of this data involves products no longer available so the TGA has at this stage withdrawn registration for these.

Large clinical trials are also proceeding in Australia and overseas on transvaginal mesh for pelvic organ prolapse. These studies are comparing patients undergoing prolapse repair with and without mesh. The follow up extends over several years and will provide a huge amount of information on long term outcomes and help us determine which patients require mesh for successful surgery or which patients are more at risk of mesh complications.

For those patients with severe or recurrent prolapse in whom a vaginal mesh repair is the safest and most effective treatment option, it is anticipated transvaginal mesh will be available under special arrangement with the TGA. However it may be necessary for patients to travel to larger centres with subspecialist urogynaecologists or experienced pelvic floor surgeons.

Despite this adverse media reporting, please be reassured that the overwhelming majority of women with transvaginal mesh implants for prolapse and urinary incontinence continues to do well. And if you are concerned about possible mesh complications, UGSA has a list of centres where you can seek treatment.

**UGSA Executive Board**

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