

# Evaluating vaginal closure techniques during colporrhaphy and effects on post-operative pain

<b>Submission date</b> 04/01/2012	<b>Recruitment status</b> Stopped	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 10/02/2012	<b>Overall study status</b> Stopped	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 24/02/2016	<b>Condition category</b> Urological and Genital Diseases	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Pelvic organ prolapse is when the womb or vagina have lost normal support and drop down from the normal positions, causing women to feel a lump or heavy feeling. Gynaecologists frequently perform surgery for prolapse and this study is examining how the skin of the vagina is stitched together at the end of the operation. Our study will compare two different ways of closing the vaginal skin at the time of surgery and the effect on pain felt afterwards.

### Who can participate?

Women over the age of 18 having surgery for prolapse in our hospitals are able to participate.

### What does the study involve?

Participants will have their planned surgery as normal. The only thing which will be different if taking part in the study is the way in which the skin of vagina is closed at the end. The final step of any surgery is closure of the vaginal skin and this is where the way we close the skin will be different, depending on which group the participant been allocated to. One group will have the skin closed with separate stitches spaced about half a centimetre apart, and the other group will have a single, running stitch along the whole length of the surgical incision. We are interested in how much pain is experienced by participants, so at 24 hours after your surgery we will ask about your pain using a pain scale, scoring any pain felt from 0 to 10. This will be done again after 48 hours. Patients will be seen again 12 weeks after surgery to allow us to collect information on complications after surgery.

### What are the possible benefits and risks of participating?

There are no short term benefits to participants directly although in the long term we expect our study will help future patients with pelvic organ prolapse because our results may show that less post-operative pain is experienced with one particular method over the other. There are no risks or disadvantages participating in this study as we are evaluating two different closure methods that are already in current surgical practice.

### Where is the study run from?

The study is being run from the University of Leicester and patients having surgery in the University Hospitals of Leicester NHS Trust will be approached to take part.

When is the study starting and how long is it expected to run for?  
The study will start in June 2012 and is expected to run for about 18 months

Who is funding the study?  
The study is being funded by the University of Leicester and the UHL Trust

Who is the main contact?  
Dr Douglas G Tincello MB ChB MD FRCOG  
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## Contact information

**Type(s)**  
Scientific

**Contact name**  
Mr Douglas Tincello

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers**  
Version 1

## Study information

**Scientific Title**  
Prospective randomised trial evaluating vaginal closure techniques during colporrhaphy and effects on post-operative pain

**Study objectives**  
Following vaginal prolapse surgery, post-operative pain is affected by the method of vaginal skin suturing. Our hypothesis is that continuous sutures cause less pain than interrupted sutures, without any difference in other operative morbidity.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised prospective double-blind trial

**Primary study design**

Interventional

**Secondary study design**

Randomised controlled trial

**Study setting(s)**

Hospital

**Study type(s)**

Treatment

**Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

**Health condition(s) or problem(s) studied**

Uterovaginal prolapse

**Interventions**

Group 1: closure of the vaginal skin with interrupted polyglycolic acid sutures

Group 2: closure of the vaginal skin with continuous unlocked polyglycolic acid sutures

**Intervention Type**

Procedure/Surgery

**Primary outcome measure**

Post-operative pain immediately before pack removal, and 3 hours after pack removal. All packs will be removed 24 hours after surgery. Pain will be assessed by 10 point visual analogue scale score

**Secondary outcome measures**

1. Incidence of re-attendance for bleeding or discharge
2. Incidence of clinically diagnosed pelvic haematoma (attendance or admission with vaginal bleeding,  $\pm$  fever,  $\pm$  pain,  $\pm$  ultrasound detection of haematoma if clinically indicated)
3. Sexual dysfunction at 3 month follow-up Pelvic Organ Prolapse/Urinary Incontinence Sexual Function Questionnaire (PISQ-12) for women who are sexually active
4. Prolapse stage (assessed by POPQ) of anterior and posterior compartment at 3 month follow up

**Overall study start date**

01/06/2012

**Completion date**

30/06/2013

## Eligibility

**Key inclusion criteria**

Any patient undergoing anterior and/or posterior colporrhaphy and/or perineorrhaphy with or without vaginal hysterectomy

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Female

**Target number of participants**

110

**Key exclusion criteria**

Patients receiving vaginal mesh repairs for prolapse, or concomitant surgical procedures such as mid-urethral tape, vault suspension procedures including sacrospinous ligament fixation and sacrocolpopexy, total abdominal hysterectomy

**Date of first enrolment**

01/06/2012

**Date of final enrolment**

30/06/2013

## Locations

**Countries of recruitment**

England

United Kingdom

**Study participating centre**

Leicester Royal Infirmary

Leicester

United Kingdom

LE2 7LX

# Sponsor information

## Organisation

University of Leicester (UK)

## Sponsor details

c/o Dr Graham Hewitt  
Research Governance Manager  
College of Medicine, Biological Sciences and Psychology  
Leicester  
England  
United Kingdom  
LE1 7RH

## Sponsor type

University/education

## ROR

<https://ror.org/04h699437>

# Funder(s)

## Funder type

University/education

## Funder Name

University of Leicester (UK)

## Alternative Name(s)

UoL

## Funding Body Type

Private sector organisation

## Funding Body Subtype

Universities (academic only)

## Location

United Kingdom

# Results and Publications

Publication and dissemination plan

Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration