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Clinical Management of Pelvic Organ Prolapse

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Message from the Guest Editor

Dear Colleagues,

Pelvic organ prolapse (POP) is a common problem that increases with women's age and can affect the quality of life of concerned women significantly. Treatment options for patients with symptomatic POP include, alongside pessary placement, surgical repair, and around 13% of women undergo surgery at some point in their lives for the management of prolapse. Surgical treatments can be either reconstructive or obliterative. whereas reconstructive procedures for apical defects can be divided into procedures with and without uterine conservation. While vaginal hysterectomy (VH) with apical fixation has long been established as the most commonly performed procedure for POP, uterine-preserving techniques have gained popularity in recent years.

Personalized approaches to treatment as well as the definition of various risk factors for PFDs such as pelvic organ prolapse or urinary incontinence over the last few decades have led to significant improvements in treatment and preventive strategies in this group of patients. The aim of this Special Issue is to collect and publish original articles as well as reviews demonstrating advances in the therapeutic field of urogynecology.



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