

## Pessary

A pessary is a small plastic or silicone device placed into the vagina and held in place by the pelvic floor muscles. It provides support for pelvic organ prolapse and stress urinary incontinence.

The pessary supports the vaginal walls. It applies pressure to the urethra (the tube that drains urine from the bladder) against the pubic bone. It also supports the lower part of the bladder. A pessary may be ideal if:

- You are pregnant.
- You want to have more children.
- You want to avoid surgery.
- Surgery is too risky.
- You had surgery for urinary incontinence that did not work.

### Pelvic Organ Prolapse

Layers of muscle and strong tissue hold pelvic organs like the bladder, uterus, and rectum in place. Weakness in these tissues can lead to defects in the pelvic support, which can lead to prolapse.

Weakness of the pelvic floor is more likely in women who had a vaginal birth, hysterectomy, or other pelvic surgery. It is also more likely in women with chronic constipation, chronic cough, or women who do a lot of heavy lifting.

### Stress Urinary Incontinence

Stress urinary incontinence is when laughing, coughing, sneezing or any force that increases lower abdominal pressure, causes urine to leak. This affects about 1 in 5 adult women.

### Choosing Your Device

Choosing the right device depends on what is being treated. Your provider may try many sizes or styles during your visit. After

a pelvic exam, your provider will fit you with a pessary. The fitting is by trial and error. The largest device that you can wear comfortably works the best.

### Guidelines

- No active infection of the pelvis or vagina.
- No allergy to the material used to make the device (silicone).
- You should only be fitted for a pessary if you can come to clinic for regular follow-up visits.
- Most pessaries can be left in place during sex. Your provider will tell you if yours cannot.
- You can use a pessary if you use the Estring<sup>®</sup>. Be sure to insert the Estring<sup>®</sup> before the pessary. Replace the Estring<sup>®</sup> every 3 months.
- If your weight changes more than 10 pounds you may need to be re-sized.
- If the pessary shows signs of wear or defects, you will need a new one.

### Follow Up

Return to the clinic 1 to 2 weeks after the first fitting so that the fit can be rechecked. The pessary will be taken out and you will have a vaginal exam.

After that, return to the clinic every 2 to 3 months, or longer, if you can remove and reinsert the pessary yourself. Some patients may need to return to the clinic more often for re-fitting. Return to the clinic yearly for an exam.

## Side Effects

- Increased vaginal discharge and odor. This is the most common side effect and can be managed with medicine.
- Irritation and vaginal ulceration. This is most common in postmenopausal women. Treatment with vaginal estrogen cream will decrease the risk.
- The device can embed into the vaginal lining and may be hard to remove. In extreme and rare cases, you would need surgery to remove it.
- A fistula (opening between the rectum or bladder and the vagina) This is very rare.
- Your risk of vaginal cancer **will not** increase.

## When to Call

- Painful urination or not able to urinate
- Painful bowel movements
- Excess or foul-smelling discharge from vagina
- Large amount of white discharge from vagina
- Bloody vaginal discharge
- Pain, pressure, or itching in the vagina
- Fever or chills
- Abdominal pain
- The pessary falls out and you cannot replace it, or you cannot remove it

## Pessary Care

Your provider will tell you how to care for your device. You can wear most pessaries for many days to months before you need to take it out and clean it. Clean it with mild soap and warm water. Rinse well and put it back in.

The pessary may fall out if you strain or lift something. Try not to bear down hard, such as during bowel movements. If it comes out, you can reinsert it after cleaning it with soap and water. If it keeps falling out, it may be too small. Call to schedule a fitting.

The best way to insert it is while standing with one foot resting on a stool. Other choices are while sitting on the toilet or lying on your back. Use a good amount of water-based lubricant, such as K-Y Jelly or Trimo-San Jelly.

Pessary type: \_\_\_\_\_

Pessary size: \_\_\_\_\_

## Who to Call

Urology Clinic  
**(608) 263-4757 or (800) 323-8942**

After hours, weekends and holidays you will reach the paging operator. Ask for the Urology doctor on call. Leave your name and phone number with area code and the doctor will call you back.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 4/2024. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5477