



DECISION AID

Uterine prolapse:

What are your treatment options?

If you are reading this, you have probably been diagnosed with a uterine prolapse. That means that your womb (uterus) has slipped down a lot from its normal position and may already be bulging out of your vagina. Your bladder or bowel may have slipped down too.

There are various treatment options for uterine prolapse. The aim is to reduce related issues like bladder problems, feelings of pressure and pain in the vagina. Your doctor might have recommended surgery. In most cases, this will not have to involve removing the womb.

The aim of this decision aid is to help you choose a suitable treatment together with your doctors. If you live in Germany and your doctor has recommended surgery to remove your womb (a hysterectomy), you have the right to get a second medical opinion.

THESE ARE THE TREATMENT OPTIONS:

Without surgery

- Pelvic floor exercises
- Pessary to support the organs

Surgery

- Without removing the womb:
Sacrohysteropexy, sacrospinous fixation or pectopexy
- Surgery to remove the womb (hysterectomy)

*You can read
about the pros
and cons of these
treatments on the
next pages.*

MAKING AN INFORMED DECISION

This decision aid probably won't include all of the information that you need. You will still have to talk to a doctor, but the decision aid can help you. Your treatment decision will also depend on various personal factors, including whether you still wish to have children, which organs have dropped down, and what problems that is causing. Any other treatments you have tried and how successful they were will also play a role.



Even if your symptoms are very distressing: Take the time to find out what you want to know and don't let anyone pressure you into choosing a certain treatment.

PROS AND CONS OF NON-SURGICAL TREATMENT OPTIONS

	Pelvic floor exercises	Pessary
What does the treatment involve?	Pelvic floor exercises (also known as Kegel exercises) strengthen the muscles that support organs like the womb and bladder. The exercises take a few minutes and are done 1 to 3 times per day.	Pessaries are small cubes, rings or saucer-shaped devices made of rubber or silicone. They are inserted into the vagina with the aim of supporting the organs in the pelvis.
Do the symptoms improve?	Pelvic floor exercises mainly help to reduce urine leakage. Doing the exercises regularly can improve the symptoms, but it doesn't always help enough. It hardly affects the position of the organs.	Bladder and bowel problems may improve. Some women are able to delay or avoid surgery. About half of all women who use pessaries continue to use them for at least several years.
What are the possible side effects?	Pelvic floor exercises usually don't have any side effects. Doing them incorrectly can lead to tension and pain.	Pessaries may lead to pressure sores in the vagina and constipation. Vaginal sex (where the penis enters the vagina) can be unpleasant when using a pessary, or may not be possible. But you can take some types of pessaries out and put them back in yourself.
Who is the treatment suitable for?	Pelvic floor exercises mainly help women who have a mild to moderate prolapse.	Most women can try out a pessary. But it's not always possible to find one that fits well.

PROS AND CONS OF SURGICAL PROCEDURES

	Sacrohysteropexy	Sacrospinous fixation	Pectopexy	Hysterectomy (surgery to remove the womb)
What does the treatment involve?	The womb (uterus) is lifted up and attached to the sacrum or coccyx (tailbone) using synthetic mesh.	The neck of the womb (cervix) is attached to ligaments in the pelvis in order to lift up the womb. This is done through the vagina.	The womb is supported with synthetic mesh that is stretched across the pelvis and fixed in place.	The womb is removed – either partially or completely.
Who is the treatment suitable for?	For most women who have uterine prolapse but no other womb-related health problems.			<ul style="list-style-type: none"> • For women who don't want any (more) children. • For women who have other womb-related health problems too.
How much can the treatment help?	After surgery, about 90 out of 100 women no longer have problems such as urine leakage and pain during sex.	Compared to the other procedures, this one is somewhat worse at relieving the symptoms over the long term.	After surgery, about 90 out of 100 women no longer have problems such as urine leakage and pain during sex.	After surgery, about 90 out of 100 women no longer have problems such as urine leakage and pain during sex.
How likely is the womb to slip down again?	This happens in about 20 out of 100 women.	This happens in about 30 out of 100 women.	This happens in about 20 out of 100 women.	This happens in about 20 out of 100 women.
What are the possible disadvantages of the treatment?	About 5 out of 100 women have complications like an infected wound, bladder injury or bowel injury. In rare cases, the synthetic mesh becomes detached.	About 5 out of 100 women have complications like a bladder injury, bowel injury or an infected wound.	About 5 out of 100 women have complications like a bladder injury, bowel injury or an infected wound. In rare cases, the synthetic mesh becomes detached.	About 5 out of 100 women have complications like a bladder injury, bowel injury or an infected wound. This is a more major operation than procedures that do not remove the womb.
Can you still have children after the treatment?	Yes. But women who wish to have (more) children are advised to have the surgery afterwards, if possible.			No

YOUR DECISION

You can now weigh the pros and cons of the different treatments for yourself. Which of them are better suited to you and your life circumstances, and which of them aren't?

WHAT IS IMPORTANT TO YOU?

You can use this table to note the main issues for you when considering the options. Which of them will affect your decision? How important are they to you? Mark the statements that apply to you, and add any thoughts of your own. Ranking the statements could help: For instance, you could mark the statements that are especially important to you with a 1, those that are a little less important with a 2, and so on.

Which statements apply to you?		Your ranking (1, 2, ...)
My symptoms are so distressing that I definitely want a treatment with a permanent effect.	<input type="radio"/>	
I'd like to try out a non-surgical treatment first.	<input type="radio"/>	
I've already tried out pelvic floor exercises or a pessary, but that didn't help enough.	<input type="radio"/>	
I'd still like to get pregnant.	<input type="radio"/>	
I wonder whether surgery could help.	<input type="radio"/>	
I'm worried about the risks of surgery.	<input type="radio"/>	
I don't know which treatments are even an option for me based on my diagnosis.	<input type="radio"/>	
	<input type="radio"/>	
	<input type="radio"/>	
	<input type="radio"/>	

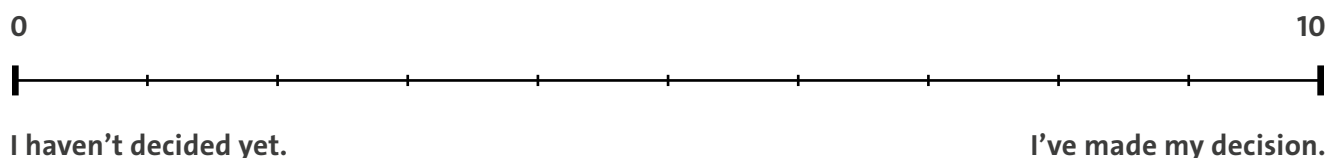
WHICH TREATMENT WOULD YOU CONSIDER?

You can use this table to assess the different treatments. Mark the ones you would consider and write down what you like and don't like about them.

Which treatment would you consider?		What do you like about it?	What don't you like about it?
Pelvic floor exercises	<input type="radio"/>		
Pessary	<input type="radio"/>		
Sacrohysteropexy	<input type="radio"/>		
Sacrospinous fixation	<input type="radio"/>		
Pectopexy	<input type="radio"/>		
Hysterectomy (surgery to remove the womb)	<input type="radio"/>		

HOW FAR HAVE YOU GOT WITH YOUR DECISION?

You can use this section to record how far along you are in your decision-making process. Mark where you are on a scale of 0 to 10.



If you still aren't sure and need more help, you can find some tips and more information on the following pages.

WHAT ELSE DO YOU NEED IN ORDER TO MAKE A DECISION?

With all the different pros and cons to consider, it can be hard to choose a treatment. Then the following might help:

Knowledge If you feel that you don't have enough information:	<input type="checkbox"/> Write down your questions. <input type="checkbox"/> Make notes on where you could get answers (for example, on the internet, at the library, or from healthcare professionals or counselors). <input type="checkbox"/> If you're considering a hysterectomy: In Germany, you have the right to seek a second medical opinion. You can find out more about that option on the next page. <input type="checkbox"/> There you will also find links to further information.
Importance to you If you aren't sure which pros and cons are most important to you:	<input type="checkbox"/> Talk with people who know about these pros and cons from their own experience. <input type="checkbox"/> Speak to others who have already made the same kind of decision. <input type="checkbox"/> Read about others who were in a similar situation and see what mattered most to them. <input type="checkbox"/> Discuss with other people what is most important to you.
Support If you feel you aren't getting the support you need:	<input type="checkbox"/> Discuss the various options with a trusted person (for instance, with your doctor, someone in your family, or a friend). <input type="checkbox"/> Take this decision aid with you to your next appointment and talk about it with your doctor. <input type="checkbox"/> Contact patient advice services or a support group. You will find more information about this on the next page. <input type="checkbox"/> Seek help to support your choice (like financial support, childcare, transport for appointments, or someone to go with you).
If you feel pressured by others to choose a certain option:	<input type="checkbox"/> Focus on those people's opinions that matter to you the most. <input type="checkbox"/> Discuss this decision aid with others. <input type="checkbox"/> Ask someone else to fill in this decision aid. Where do your answers match? If you disagree on the facts, get more information. If you disagree on what matters most, consider the other person's point of view. Take turns listening to what matters most to the other person. <input type="checkbox"/> Find a neutral person to help you and the other people who are involved.

YOU WILL FIND IN-DEPTH INFORMATION ABOUT THE FOLLOWING TOPICS ON THE INTERNET:

	Pelvic organ prolapse and the treatment options www.informedhealth.org/pelvic-organ-prolapse.html
	At the hospital www.informedhealth.org/at-the-hospital.html
	Surgery www.informedhealth.org/surgery.html
	Second medical opinion www.informedhealth.org/second-opinion-before-surgery.html
	Patient advice services and support groups www.informedhealth.org/support-groups-and-information-centers

PREPARING FOR THE DOCTOR'S APPOINTMENT

Do you still have any questions or concerns? Write down your questions or your own thoughts to discuss with the doctor.

There's a list of possible questions here:

www.informedhealth.org/questions

PUBLISHING DETAILS

Institute for Quality and Efficiency in
Health Care (IQWiG, Germany)

www.informedhealth.org/about-us

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The format of this decision aid is based on the following:

- Ottawa Personal Decision Guide. O'Connor, Stacey, Jacobsen 2012. Ottawa Hospital Research Institute and University of Ottawa, Canada.
- MAKING SDM A REALITY – Hospital-wide shared decision making – G-BA Innovation fund 2023.
- Institute for Quality and Efficiency in Health Care (IQWiG, Germany). Development of a decision aid for hysterectomy: Rapid Report; Commission P18-01. 2019.