SPOTLIGHT ON... STRESS URINARY INCONTINENCE

CONTD P14

Vaginal mesh surgery: 'I was wetting myself – it was embarrassing'

Women in Ireland who need surgery to correct stress urinary incontinence are calling on the HSE to lift the 2018 pause on vaginal mesh surgeries

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Health

One in every two women suffers with stress urinary incontinence [SUI] – when urine spills, leaks or squirts out during activities that put pressure on the bladder. It could be a very small leakage – only one or two drops – or it could be much more.

SUI tends to impact pre-menopausal women, brought on as a result of childbirth and pregnancy. The ligaments that support the urethra become weaker, causing a loss of bladder control. SUI can affect so many aspects of a woman's life: what she wears, whether she exercises, even the number of cups of coffee she drinks.

Waiting on surgery: Liz Lenehan

Liz Lenehan has suffered with stress incontinence for about 15 years. After having her third child in 2010, she says her condition got "progressively worse".

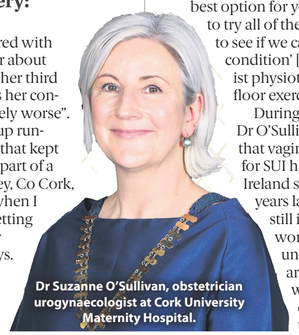
Liz has long given up running, a social pastime that kept her fit. She used to be part of a running club in Blarney, Co Cork, where she lives "but when I was running, I was wetting myself, so it was really embarrassing," she says.

"I had a pad, underwear, EVB shorts [shorts specifically made for stress incontinence] and then my other shorts, and I was constantly really hot from all of the layers. At the end of the race, I'd always be running for a portaloo to get out of the wet clothes so I didn't get back into my car with my friends with the smell of urine.

"By 2020, I was probably six years just trying to manage it and put up with it," says Liz.

"The sad advice now is that the only thing that will actually work for me is vaginal mesh surgery."

Mesh is a weave of a synthetic suture material used in many areas of surgery for the past 55 years. In vaginal mesh surgery, it is used as a sling to support the vaginal wall and the operation involves placing a very narrow strip of mesh under the bladder neck through the vagina.



Dr Suzanne O'Sullivan, obstetrician urogynaecologist at Cork University Maternity Hospital.

Expert option: Dr Suzanne O'Sullivan

The GP referred Liz to Dr Suzanne O'Sullivan, obstetrician urogynaecologist at Cork University Maternity Hospital.

"During that very first appointment with Suzanne, when I was going through all of my symptoms and issues, she said, 'I really think this surgery is going to be the best option for you. But we're going to try all of these other things first to see if we can improve your condition' [including specialist physiotherapy and pelvic floor exercises]."

During that appointment, Dr O'Sullivan also told Liz that vaginal mesh surgery for SUI had been paused in Ireland since 2018. Seven years later, that pause is still in place. This means women who wish to undergo this surgery are on a national waiting list. Their only other option is to travel abroad to have it performed in another EU country.

In some, but not all cases, the operation is covered by the Treatment Abroad Scheme [TAS]. The HSE told *Irish Country Living* that, "a fully completed application form must be submitted to determine eligibility for funding of the [vaginal mesh] treatment under the TAS.

"Less than five people have availed of TAS funding for this treatment. The total cost for the treatments was €13,713."

Pause on mesh procedures

In 2018, the HSE paused all urogynaecological mesh procedures following reports of complications associated with the use of transvaginal mesh devices at a national level.

Some women who had the vaginal mesh surgery for stress incontinence and pelvic organ prolapse reported having chronic pain, groin and pelvic pain as well as bladder and bowel problems afterwards.

The then Minister for Health, Simon Harris, requested that then chief medical officer [CMO], Dr Tony Holohan prepare a report on the use of urogynaecological mesh in surgical procedures.

In July of that year, the CMO asked the Health Service Executive (HSE) to pause all mesh procedures and it was advised that it remain in place until 19 recommendations made by Dr Holohan in his 2018 report were completed.

In 2023, the HSE established a National Vaginal Mesh Implant Oversight Group [which Dr O'Sullivan sat on] to review the recommendations of the 2018 report and determine whether the pause should be lifted.

All 19 recommendations have been implemented, including that only accredited subspeciality trained surgeons can carry out the procedure and that a register of all mesh implants is used.

The review has now been with the Department of Health for over a year.

Liz Lenehan of Courtbrack, Co Cork is awaiting surgery.
\ Donal O' Leary

"The HSE Oversight Group submitted its report to the Department of Health for consideration. The HSE and the Department of Health are in dialogue regarding next steps," the HSE Press Office told *Irish Country Living*.

In the meantime, Dr O'Sullivan tells *Irish Country Living* that there are around 230 women waiting for surgery in Cork.

"Currently, their options are operations that were there in the 60s, 70s and 80s."

There are three other surgical procedures for SUI: autologous fascial sling, colposuspension and bladder neck injection. Dr O'Sullivan argues that women should be able to avail of all of the options, including vaginal mesh surgery.

"Irish women deserve – just like women everywhere else in the world – the choice to have the operation that's best for them. They should be able to look at the pros and cons, and be able to choose the one that makes the most sense for them.

"That's what the national guidelines say and that's in keeping with best international practice," she says.

Dr O'Sullivan also points out that there is a very similar operation for men with stress incontinence – where a mesh strip is inserted after prostate surgery – and that has never been paused for men in Ireland.

"The nurses couldn't believe what was going on in Ireland. They asked 'what do Irish women do?' I told them 'they're left to wear pads and be sopping wet"

Una Ní Chormaic spent €15,000 on vaginal mesh surgery in Spain in 2023 because she could not be operated on in Ireland.

When Liz first approached Dr O'Sullivan in 2020, she never thought that she'd still be on a waiting list in 2025.

"It's got to the point where I can't really walk anywhere without dribbling," Liz says. "And good luck if you sneeze or cough, you're drowned."

Liz is not considering treatment abroad because she wants Dr O'Sullivan to perform her surgery. "I really don't want anybody except Suzanne doing my surgery, because I trust her so much," she says. "I've waited for so long at this stage."

Surgery abroad: Una Ní Chormaic

In the summer of 2018, Una Ni Chormaic was scheduled for vaginal mesh surgery, due to take place that August. However, when the pause on surgeries was announced, hers was cancelled. Five years later, she decided she was not going to wait any longer and she went abroad for her operation.

"My surgery was in September 2023," she tells *Irish Country Living* from her home in Dublin. "My life was on hold until I had this operation."

Following the birth of her child, Una was diagnosed with SUI and two subsequent pregnancies and years of physiotherapy later, things were not improving.

"The only option I was left with was to wear pads," says Una. "I couldn't even run after my children, just the slightest jerk would trigger urination.

"I was ready to have the surgery so I could not believe that the Government could pause them when it wasn't in line with international best practice," says Una. "Ireland followed the United Kingdom slavishly in making this decision."

In other European countries, operations using mesh for SUI were not halted and still continue today.

"When Simon Harris signed off on this blunt decision, he literally regressed the gynae options for women in Ireland back 25 years," says Una.

"I am a grown woman. I am educated. As a patient and a physicist, I have the right to weigh up the risks versus benefits to my own body. I was very informed. My surgeon informed me of absolutely everything. He was so thorough."

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"Most of us who had mesh implants were not informed of the possible harmful outcomes"

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Desperate to get the pause lifted, Una felt she had no choice but to start a targeted letter writing campaign. "I wrote to journalists, I wrote to politicians. I wrote to Simon Harris and I disclosed very personal, very private, very intimate details of my body – practically as a begging letter for them to overturn this decision.

"I shouldn't have had to disclose really private, intimate details of my body for this decision to be overturned. But my conviction was so strong that I felt I didn't have a choice. This was such an unjust decision and inhumane for women and for women's overall physical health and mental wellbeing in the long run that I actually decided to just come out," she says.

Around 2022, Una started to hear that some women were going abroad for the procedure. At that point she describes herself as a "shadow of who I formerly was". She started to research hospitals in Madrid because she speaks Spanish and was assessed by three hospitals. Una settled on Hospital Ruber Internacional for her operation.

"The nurses couldn't believe what was going on in Ireland. They asked 'what do Irish women do?' I told them 'they're left to wear pads and be sopping wet'."

Una self-funded her surgery and trip to Spain.

"I had to spend €15,000 (€2,600 of which was covered by her health insurance provider) of money that I did not have. I had to borrow from the credit union and use up money that I had saved over years for my daughter's Transition Year."

The procedure was quick – only 30 minutes – and Una stayed in a hotel nearby recovering for one week. She flew back to Ireland after seven days and recovered at home for nearly 12 weeks.

"One of the best decisions I ever made in my life was to go to Madrid and have this surgery," says Una.

She can now cough, sneeze, dance and run – all without any leakage, and recalls one euphoric moment running on the beach without leaking for the first time in 14 years.

Two years on from her operation, Una continues to advocate for the reversal of the pause on vaginal mesh surgery.

Since her operation in 2023, Una has had 42 women contacting her through word-of-mouth alone.

"Women are having to go through the back door to get help from other women who have gone abroad for this surgery so that they can fix their bodies," she says.

"I send them information on exactly what I did, the procedure, the pros, the cons, and I am not a medical person. I'm simply passing on my experience of what it did. Imagine this is how we do healthcare in Ireland."

Mesh injured women

However, not all women want to see the pause lifted on vaginal mesh surgery. On 1 July, *Irish Country Living* attended a briefing in the AV room for TDs in Leinster House, hosted by Mesh Survivors Ireland, a campaign group comprising 876 women who have experienced medical complications caused by vaginal mesh. Some of these women have had operations to get the mesh removed but the precise number is not known.

The group do not want to see the reintroduction of vaginal mesh implants in Ireland. However, they say that if it is inevitable that the surgery is reintroduced, that informed consent standards should be enforced.

They also would like funding to be made available for women to travel abroad for vaginal mesh removal through the Treatment Abroad Scheme, as well as compensation for mesh-injured women, some of whom can no longer work due to chronic pain.

"Women are left in chronic pain, unable to walk, work, constant UTIs, loss of relationships, erosion into other organs"

Margaret Byrne, spokesperson for Mesh Survivors Ireland, had a vaginal mesh implant 25 years ago and most of it is now removed.

"I went through a whole year of what they call urodynamics [tests to see how well the bladder can hold and release urine]. In the first week of the year 2000 I got a call to ask would I be interested in this new [vaginal mesh] surgery. No one said to me this could go wrong or you could get an infection."

Margaret told *Irish Country Living*: "most of us who had mesh implants were not informed of the possible harmful outcomes. It was supposed to be the gold standard, a quick-fix, minimally invasive super procedure.

"Unfortunately, for a lot of us it didn't work out that way. Within a week of my surgery, the mesh had eroded into my vagina. I mean I could actually feel it sticking out.

"One woman, who had the same surgeon as me, had the procedure six months after [me]. She had been told that nobody had a problem afterwards, even though I had problems at that stage. I had several surgeries to bury, trim, cut the mesh but none worked. I eventually got most of it taken out but not all."

Representatives and allies of the campaign group, Mesh Survivors Ireland, pictured outside Leinster House on Tuesday, 1 July. Margaret Byrne is pictured centre in the white jacket and blue dress.

Margaret is now doubly incontinent [double incontinence refers to the leakage of urine and stool involuntarily] but says "I manage it".

"I have no control over my bladder because of the number of surgeries I had."

Margaret takes a permanent antibiotic every night to avoid urinary tract infections. She adds that: "I wouldn't be the worst person in the group by far. Lots of people are suffering very badly.

"Women are left in chronic pain, unable to walk, work, constant UTIs, loss of intimacy, loss of relationships, erosion into other organs. Some women have to use a stoma bag because the mesh eroded into their bowel. It's horrific.

"[Vaginal mesh] removal is a complex procedure. It is like taking chewing gum from hair. Before they consent to mesh surgery, each patient should have considered or investigated all the non-mesh options available to them. If the pause is to be lifted in the future, it is so important that informed consent standards are enforced. Women should be making decisions in light of all the information," says Margaret.

WHAT IS VAGINAL MESH SURGERY

➲ Stress urinary incontinence is the loss of bladder control. Stress incontinence happens when movement or activity puts pressure on the bladder, causing urine to leak. Movements include coughing, laughing, sneezing, running, or heavy lifting.

➲ Stress incontinence usually happens if your pelvic floor muscles are weak or damaged. Other muscles at the opening of your bladder may also be weak.

➲ Vaginal mesh is a type of surgical mesh. This is a net-like material used to support tissues that are weakened or damaged. For example, surgical mesh is used in hernia repair.

➲ The mesh is usually made from a type of non-absorbable plastic and is meant to be a permanent implant.

➲ Vaginal mesh has been used to treat two conditions in women: stress urinary incontinence and pelvic organ prolapse.

➲ During mesh surgery, the doctor inserts a strip of mesh (implant) to help support the urethra. This takes pressure off the pelvic floor, sphincter muscles and bladder, and stops leaking. The urethra is the tube that carries urine out of your body.

➲ The mesh is inserted through the vagina (transvaginal) or abdomen (transabdominal).

➲ Rhe chief medical officer at the Department of Health produced a report, 'The Use of Uro-Gynaecological Mesh in Surgical Procedures, 2018'. Following this, the HSE placed a pause on the use of mesh for urinary stress incontinence and pelvic organ prolapse surgeries in Irish public hospitals.

➲ For more see *hse.ie*.