

Imaging Pelvic Organ Prolapse with up-right MRI

Gepubliceerd: 14-07-2016 Laatste bijgewerkt: 18-08-2022

Pelvic organ prolapse (POP) is a common condition in middle aged and elderly women. Approximately 10% of women will have surgery for POP and/or urinary incontinence during their lifetime [3, 4]. POP can occur in the anterior, posterior or apical...

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON24051

Bron

NTR

Verkorte titel

POP UP MRI

Aandoening

Pelvic organ Prolapse

Ondersteuning

Primaire sponsor: University of Twente

Overige ondersteuning: fund= initiator= sponsor = University of Twente

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The aim of this explorative study is to evaluate existing clinical parameters that are developed for supine MRI (angles, distances, function/composition of the muscle) in upright

scanning and to assess how these parameters change between supine and upright MRI scanning.

Toelichting onderzoek

Achtergrond van het onderzoek

Pelvic organ prolapse (POP) is a common condition in women above 40. Imaging of the pelvic floor with Magnetic Resonance Imaging is performed only in supine position. The effect of gravity, which is crucial to develop POP symptoms, is not taken into account. Recently, a low-field MRI system (0.25T) was introduced which offers the possibility to scan the patient in an upright position.

15 Patients will be scanned in upright and supine position, both in static and dynamic situation (Valsava and contraction). This explorative study will evaluate existing MRI parameters that are developed for supine MRI (angles, distances, function/composition of the muscle) to assess how they change between supine and upright MRI scanning, before and after prolapse surgery. And will correlate the results with the clinical manifestations measured with POP-Q.

Doel van het onderzoek

Pelvic organ prolapse (POP) is a common condition in middle aged and elderly women. Approximately 10% of women will have surgery for POP and/or urinary incontinence during their lifetime [3, 4]. POP can occur in the anterior, posterior or apical compartment of the vagina. It can happen in a single compartment, but more often multiple compartments are involved. Therefore, several surgical techniques, like anterior colporrhaphia, posterior colporrhaphia, vaginal cuff or cervix fixation are used, alone or in combination. Surgical correction of the POP is effective but unfortunately in 30% of the cases a residual prolapse occurs.[4] It is unclear why these recurrences occur. One of the theories is that with our traditional physical (gynecological) examination anatomical details of the POP, that are crucial for surgical repair and success, are missed [5-8]. In the last decades imaging techniques, like ultrasound and MRI, have been developed to study the anatomy of the pelvis in healthy but also POP patients. MRI offers a superior detail of the organs and muscles under study, but imaging of the pelvic floor is performed only in supine position. The effect of gravity, which is crucial to develop POP symptoms, is not taken into account in this supine position. Recently, a low-field MRI system was introduced which offers the possibility to scan the patient in a weight bearing, upright position. If the images obtained with this standing MRI are associated with POP severity and show us the anatomical defects in more detail, this information may be useful to fine tune surgical techniques and reduce recurrences.

Onderzoeksopzet

Before prolapse surgery

6 weeks after prolapse surgery

Onderzoeksproduct en/of interventie

open low field-MRI (0.25T, Esaote), with a tilting function up to 90 degrees

Contactpersonen

Publiek

NIM group
Twente University
Judith olde Heuvel
Enschede
The Netherlands
Phone: +31 652172679

Wetenschappelijk

NIM group
Twente University
Judith olde Heuvel
Enschede
The Netherlands
Phone: +31 652172679

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Patients with POP >18 yr
- Symptomatic prolapse
- >Grade 2 POP-Q
- Good knowledge of Dutch language
- Signed informed consent

- Planned for prolapse repair surgery (anterior and/or posterior wall repair, Manchester, sacrocolpopexie)

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Previous prolapse repair surgery
- Inability to stand for 15 minutes, without assistance
- Hip width < 47 cm
- Not allowed to do a maximum Valsalva maneuver because of cardiac or pulmonary disease
- Not eligible for MRI, in response to the MRI safety checklist

Onderzoeksopzet

Opzet

Type: Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel: Anders
Controle: N.v.t. / onbekend

Deelname

Nederland
Status: Werving nog niet gestart
(Verwachte) startdatum: 01-09-2016
Aantal proefpersonen: 15
Type: Verwachte startdatum

Ethische beoordeling

Niet van toepassing
Soort: Niet van toepassing

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL4060
NTR-old	NTR5944
CCMO	NL57695.044.16

Resultaten

Samenvatting resultaten

none