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## **UTERINE PROLAPSE COMPLICATION DUE TO TREATMENT DELAY**

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Pelvic organ prolapse is a pathology that affects 8% of women representing a significant socio-economic burden although it is a benign condition [1]. The incidence is expected to increase in the next half decade with nearly 50% [2]. Symptoms like vaginal pressure, voiding dysfunction, defecation dysfunction, sexual dysfunction, lesions on the mucosa are the result of uterine herniation into or beyond the vagina. In this paper we present the case of a 67 year old woman with complete uterine prolapse. The patient had no significant pathology associated, and 1 birth trough caesarian section. Climax was installed 20 years. The patient affirmed that the uterus started to descend 5 years ago and only now decided to address the gynecologist. At the clinical examination a complete uterine prolapse (100/60 mm) was observed, with multiple circular lesions of the mucosa. The woman followed topic estrogen therapy and surgery was performed 3 months later (vaginal hysterectomy with cystocele and rectocele treatment). After surgery the symptomatology was absent and the quality of life was significantly improved.

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