

Vaginal Hysterectomy (for Prolapse)

Patient Information · Removing the uterus through the vagina, with a top-of-vagina lift

WARWIKI

When the uterus has dropped as part of pelvic organ prolapse, one option is a **vaginal hysterectomy** — removing the uterus entirely through the vagina, with **no abdominal incision**. It is almost always combined with a **suspension** of the top of the vagina (and often other repairs) so that the area is well supported afterward.

About This Procedure

The uterus is detached and removed through the vagina. Then the **top of the vagina is suspended** to your own strong pelvic ligaments so it doesn't prolapse later. Front- or back-wall repairs may be added based on your exam. The vaginal route generally means **less pain and faster recovery** than surgery through the abdomen.

Things to Know

- Removing the uterus ends periods and the ability to carry a pregnancy.
- If the prolapse mainly involves the uterus and you wish to **keep your uterus**, a uterus-sparing suspension (hysteropexy) may be an option — ask your surgeon.
- A separate procedure for **urine leakage** may be added if needed.

LEARN THE TERMS

Hysterectomy

Surgery to remove the uterus.

Vaginal route

Done through the vagina, with no abdominal incision.

Vault suspension

Re-anchoring the top of the vagina so it stays supported.

Hysteropexy

A uterus-sparing alternative that suspends without removal.

Prolapse

When pelvic organs drop and cause a bulge or pressure.

Vaginal packing

Gauze placed briefly after surgery to support healing.

WILL IT HURT? It's done under anesthesia, so you feel nothing during it. Because there is no abdominal incision, recovery is usually easier than other hysterectomy routes — expect mild-to-moderate soreness, with most people home the same day or after one night.

How to Get Ready

- Follow your **anesthesia instructions** (fasting, hold blood thinners as told).
- A pre-op evaluation; discuss whether other repairs or an anti-leakage procedure will be added.
- Don't smoke; arrange a ride and help at home.

What Happens

- 1 You are under anesthesia; antibiotics are given.
- 2 The uterus is detached and removed **through the vagina**.
- 3 The top of the vagina is **suspended** to your ligaments; added repairs are done as planned.
- 4 A catheter and sometimes a vaginal pack are placed briefly.

After Surgery

- Light spotting/discharge for a few weeks is normal as the top of the vagina heals.
- **Avoid heavy lifting, straining, and sex for about 6 weeks.**
- Keep stools soft to avoid straining; rest, then gradually increase activity.

Call your care team if you have:

- A fever or chills, or heavy bleeding
- You **cannot urinate**, or worsening pelvic/belly pain
- Foul-smelling discharge, or anything coming through the vagina

THREE THINGS TO REMEMBER

1. Vaginal hysterectomy removes the uterus through the vagina (no belly incision) and includes a suspension of the vaginal top.
2. It ends periods and pregnancy; if you want to keep your uterus, ask about a uterus-sparing suspension.
3. Avoid heavy lifting and sex ~6 weeks; spotting is normal. Call for fever, heavy bleeding, or trouble urinating.