



Service Priorities and Programmes
Electronic Presentations

Convention ID: 128

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The Service Improvement of managing Pelvic Organ Prolapse (POP) patients in Department of Obstetrics and Gynaecology, Queen Elizabeth Hospital

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Keywords:

Pelvic organ
Improvement
Prolapse

Introduction

The prevalence of POP and urinary incontinence is high and it affects up to 50% of parous women. The lifetime risk of undergoing surgery for utero-vaginal prolapse or incontinence has been estimated at 11% with re-operation rate of 29%. In year 1997, it is estimated the frequency of surgery for POP in United States is similar to other operation for women including cholecystectomy, appendicetomy, coronary artery bypass graft and total knee replacement. It is also regarded as the third most common indications for hysterectomy in women treating benign conditions (16.9%) after dysfunctional uterine bleeding (31.9%) and symptomatic uterine fibroids (29.4%). The demand for urogynaecology service is expected to be increased in next decade with improvement of overall health care and improving life expectancy in Hong Kong. Besides, the awareness of public on POP in affecting their quality of life and hence further increase the service demands in Hong Kong. The Urogynaecology Center in Queen Elizabeth Hospital is considered to be the most experienced center in Hong Kong for treating female patients with POP and urinary incontinence. In the past we were capable to handle around 600 new patient visits in a year. However, the dramatic increase in demand in Urogynaecology service in Hong Kong extend the average waiting time of individual patient for POP assessment to around 8 months. This paper illustrates our plan of how we modify our team work in improving delivery of Urogynaecology service in Kowloon Central Cluster.

Objectives

To recude waiting time period of patients having Pelvic organ prolapse and improve efficiency in Urogynaecology service delivery.

Methodology

The first strategy is to add the new case quota to our outpatient service. We plan to add overall 144 new case quota for POP patients, i.e. 3 cases per week in the coming year (24% of previous new case quota per year). These entire quotas will be evenly distributed throughout the year and they will be reserved for patients having POP particularly with serious complication or severe effect on their activity of daily living. Besides, we developed specialist continence nurse assessment clinic for patients with

more severe symptom or complications of POP such as recurrent infection, vaginal bleeding. The early continence nurse assessment serves multiple functions including diagnosis, triage, and counseling. They will also deliver conservative treatment like pelvic floor exercise and introduction of vaginal ring pessary before patient has their 1st medical consultation.

Result

According to our annual statistics, around 1/3 (i.e. around 200 per year) of new case patients were seeking help for POP problems. By triaging the new POP patients to our streamline outpatient service, the expected average waiting time will be shorten dramatically from average of 8 months to 4 months. This will allow more efficient diagnosis and treatment of POP patients and hence greatly improve the quality of life of patients as POP complications who are suffering from dragging sensation, recurrent infections or even sexual dysfunction. By introducing the continence nurse assessment clinic, early appointment can be arranged if the patient was demand severe complication form POP. For other patients, they were subjectively satisfied to be seen earlier and managing the symptom before discuss definitive plan of treatment with Urogynaecologist.