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**MODERN APPROACHES TO PREVENTING THE PROGRESSION OF STAGE 1
AND 2 PELVIC ORGAN PROLAPSE**

Turazoda Maftuna Ulug'bekovna

First-year resident of the Master's program in Obstetrics and Gynecology at Samarkand

State Medical University Samarkand, Uzbekistan

Scientific advisor: Dr. Med. Sci., Professor **Khudoyarova D.R.**

Abstract: The scientific article on "Prevention of Progression of 1st and 2nd Degree Pelvic Organ Prolapse" is focused on studying the development of pelvic organ prolapse in women at stages 1 and 2. The article discusses the mechanisms of disease progression, its pathogenesis, and major risk factors, including pregnancy, childbirth, obesity, heredity, and the higher incidence in older women. The clinical manifestations, symptoms, and signs of the disease are also detailed. The article highlights effective conservative treatment methods for 1st and 2nd-degree prolapse, such as Kegel exercises, pessaries, physiotherapy, and weight reduction. Each of these methods is explained in terms of how they help slow down the progression of prolapse and their positive effects on the female body, supported by scientific studies and clinical experience. The article also emphasizes the importance of early diagnosis and prevention, as well as maintaining a healthy lifestyle. Early detection of 1st and 2nd-degree prolapse and the application of modern treatment approaches can significantly improve women's quality of life. Furthermore, the article recommends promoting a healthy lifestyle, regular gynecological check-ups, and preventive measures to reduce the risk of the disease.

Keywords: Pelvic organ prolapse, 1st and 2nd-degree prolapse, pathogenesis, conservative treatment, Kegel exercises, pessaries, physiotherapy, prevention, progression prevention, diagnosis, treatment, healthy lifestyle, pelvic muscles, weight control, gynecological check-ups.

**СОВРЕМЕННЫЕ ПОДХОДЫ К ПРЕДОТВРАЩЕНИЮ
ПРОГРЕССИРОВАНИЯ ПРОЛАПСА ПОЛОВЫХ ОРГАНОВ 1-Й И 2-Й
СТЕПЕНИ**

Аннотация: Научная статья на тему "Предотвращение прогрессирования пролапса половых органов 1 и 2 степени" направлена на изучение развития пролапса половых органов у женщин в 1 и 2 стадии. В статье рассматриваются механизмы развития этого заболевания, его патогенез и основные факторы риска, включая беременность, роды, избыточный вес, наследственность и возраст, так как заболевание чаще встречается у женщин старшего возраста. Также приводится подробное описание клинических проявлений, симптомов и признаков заболевания. В статье освещены эффективные консервативные методы лечения пролапса 1 и 2 степени, такие как упражнения Кегеля, пессарии, физиотерапия и снижение избыточного веса. Описание каждого из этих методов и их влияние на замедление развития пролапса и

положительное воздействие на организм женщины сопровождается научными исследованиями и клиническим опытом. Отдельное внимание уделяется важности ранней диагностики и профилактики заболевания, а также необходимости поддержания здорового образа жизни. Своевременная диагностика пролапса 1 и 2 степени и применение современных методов лечения могут значительно улучшить качество жизни женщин. В статье также предлагаются рекомендации по продвижению здорового образа жизни, регулярным гинекологическим осмотрам и профилактическим мерам для предотвращения заболевания.

Ключевые слова: пролапс половых органов, пролапс 1 и 2 степени, патогенез, консервативное лечение, упражнения Кегеля, pessarii, физиотерапия, профилактика, предотвращение прогрессирования, диагностика, лечение, здоровый образ жизни, тазовые мышцы, контроль веса, гинекологические осмотры.

1 VA 2-DARAJALI JINSIY A'ZOLAR PROLAPSINING PROGRESSIYASINI OLDINI OLIHNING ZAMONAVIY YONDASHUVLARI

Annotatsiya : 1 va 2-darajali jinsiy a'zolar prolapsining progressiyasini oldini olish mavzusidagi ilmiy maqola, ayollarda jinsiy a'zolar prolapsining 1 va 2-darajali bosqichlarining rivojlanishini o'rganishga qaratilgan. Maqolada prolaps kasalligining rivojlanish mexanizmlari, uning patogenezi va asosiy xavf omillari, jumladan, homiladorlik, tug'ruq jarayoni, ortiqcha vazn, irsiyat va yoshi katta ayollarda ko'proq uchrashi ko'rib chiqiladi. Bundan tashqari, kasallikning klinik ko'rinishlari, simptomlar va alomatlar tafsilotlari keltiriladi.

Maqolada 1 va 2-darajali prolapsning oldini olish bo'yicha samarali konservativ davolash usullari yoritilgan. Xususan, Kegel mashqlari, pessarlar, fizioterapiya va ortiqcha vaznni kamaytirish kabi yondashuvlar muvaffaqiyatli qilinadi. Ushbu metodlarning har biri qanday qilib prolapsning rivojlanishini sekinlashtirishga yordam berishi va ayol organizmiga ijobiy ta'sir ko'rsatishi tushuntiriladi. Shuningdek, maqolada har bir usulning qo'llanilishiga oid ilmiy tadqiqotlar va klinik tajribalar tahlil qilinadi.

Maqolada erta tashxis va profilaktikaning ahamiyati, shuningdek, sog'lom turmush tarzini qo'llab-quvvatlashning zarurligi haqida ham alohida to'xtalib o'tilgan. 1 va 2-darajali prolapsning erta aniqlanishi va zamonaviy davolash yondashuvlari yordamida ayollarning hayot sifatini yaxshilash mumkin. Shuningdek, maqola ayollarga sog'lom hayot tarzini targ'ib qilishni, muntazam ginekologik tekshiruvlarni amalga oshirishni va kasallikning oldini olish uchun profilaktik choralarini ko'rishni tavsiya etadi.

Kalit so'zlar: Jinsiy a'zolar prolapsi, 1 va 2-darajali prolaps, patogenezi, konservativ davolash, kegel mashqlari, pessarlar, fizioterapiya, profilaktika, progressiyaning oldini olish, tashxis, davolash, sog'lom turmush tarzi, pelvik mushaklar, vazn nazorati, ginekologik tekshiruvlar.

Introduction: Pelvic organ prolapse (POP) is a common and serious medical issue among women. This condition is associated with the descent or improper positioning of the uterus, bladder, or other pelvic organs. Pelvic organ prolapse is most commonly seen in the postpartum period, during menopause, or in women with excess weight. Early stages of the disease, such as stage 1 and 2 prolapse, often present with mild symptoms and may sometimes go unnoticed by patients. However, at these stages, early diagnosis and effective

preventive measures help prevent disease progression. The primary causes of pelvic organ prolapse are various physiological factors, including the process of childbirth, the woman's age, excess weight, and heredity. Additionally, the condition causes various physiological and psychological health problems, such as urinary tract disorders, limitations in physical activity, and a decrease in quality of life. The aim of this article is to examine effective preventive approaches to prevent stage 1 and 2 pelvic organ prolapse. The article analyzes conservative treatment methods such as Kegel exercises, pessaries, and physiotherapy techniques. It also emphasizes the importance of preventive measures and a healthy lifestyle in preventing the development of the condition. Early diagnosis, prevention, and treatment methods for stage 1 and 2 prolapse are aimed at improving the quality of life for women.

The aim of the research: The primary goal of this article is to explore effective preventive and conservative treatment methods aimed at preventing and slowing the progression of stage 1 and 2 pelvic organ prolapse. The article analyzes the pathogenesis of pelvic organ prolapse, the mechanisms of its development, and the main risk factors. It also discusses the effectiveness of conservative treatments, including Kegel exercises, pessaries, physiotherapy, and the importance of a healthy lifestyle.

Furthermore, the article emphasizes the significance of early diagnosis and prevention of stage 1 and 2 prolapse, as well as the need for preventive measures to protect women from pelvic organ prolapse. The aim of the article is to contribute to the prevention of the disease's development and the improvement of the overall health of women through these approaches.

Methods and Materials: This study evaluated the effectiveness of conservative treatment methods aimed at preventing and slowing the progression of stage 1 and 2 pelvic organ prolapse. The study involved 120 women diagnosed with pelvic organ prolapse (POP) of stages 1 and 2. Patients were properly selected based on clinical, instrumental, and laboratory analyses and were randomly divided into two groups. The main goal of the study was to examine the impact of conservative treatments, such as Kegel exercises, pessaries, and physiotherapy, on preventing the progression of pelvic organ prolapse.

Study Group and Participants:

- **Number of participants:** 120 women diagnosed with stage 1 and 2 pelvic organ prolapse participated in the study.
- **Participant selection:** Women aged 18 to 65 years were included in the study. The diagnosis of pelvic organ prolapse was confirmed using the POP-Q system, and all participants were randomly assigned to two groups.
- **Criteria:** Patients with stage 1 and 2 pelvic organ prolapse were selected. Patients with other severe diseases (e.g., cardiovascular diseases, acute infections, and others) were excluded.

Research Methods:

- **Diagnosis:** The degree of pelvic organ prolapse (stage 1 and 2) in each participant was determined at the initial examination. The diagnosis was made using the POP-Q system,

and pelvic ultrasound (US) was also conducted to confirm the physical condition and accuracy of the prolapse diagnosis.

- **Treatment methods:**

1. **Group 1:** Patients in this group received conservative treatments. This group included Kegel exercises, pessaries, and physiotherapeutic methods.

- Kegel exercises: Special exercises to strengthen the pelvic muscles, helping to support the pelvic organs.

- Pessaries: Medical devices used to support the pelvic organs, effective in preventing prolapse.

- Physiotherapy: Electrotherapy and myostimulation to strengthen the pelvic muscles, slowing the progression of prolapse.

2. **Group 2:** This group was observed only with general medical consultations, maintaining a healthy lifestyle, weight control, and regular gynecological check-ups. Patients were motivated to reduce excess weight and maintain a healthy lifestyle.

Monitoring and Evaluation:

- **Post-diagnosis observation:** To evaluate the treatment efficacy, the degree of pelvic organ prolapse was reassessed using the POP-Q system before and after treatment in both groups.

- **Psychosocial evaluation:** The "SF-36 Health Index" test was used to assess the overall health status and quality of life. This test measures quality of life, energy levels, psychological state, and general well-being.

- **Statistical analysis:** The study results were analyzed using SPSS 23 software. Chi-square and t-tests were used to evaluate differences between groups. Differences with statistical significance were considered significant at $p < 0.05$.

Ethical Issues:

- Approval from the ethical commission was obtained for all stages of the study. Each participant who agreed to participate in the study was fully informed and gave written consent. Participants' personal data remained confidential.

Study Duration: The study was conducted over a period of 6 months. The effectiveness and differences in treatment methods between the two groups were assessed through intermediate checks and analyses.

Results: This study evaluated the effectiveness of conservative treatment methods in preventing and slowing the progression of stage 1 and 2 pelvic organ prolapse. 120 women participated in the study, divided into two groups, and their treatment results were evaluated. Clinical examinations, diagnostics, psychological assessments, and tests to measure the impact on quality of life were conducted for both groups before and after treatment.

- **Group 1: Conservative treatment (Kegel exercises, pessaries, and physiotherapy)**
Number of patients: 60 women with stage 1 and 2 pelvic organ prolapse.

1. **Degree of prolapse and POP-Q system:**

- Initially, the average prolapse degree for patients with stage 1 prolapse was 1.3, and for patients with stage 2 prolapse, it was 2.1.

- After conservative treatment, significant improvement was observed. In 80% of stage 1 prolapse patients, the degree of prolapse decreased to 0 or 1, and in 65% of stage 2 prolapse patients, it decreased to stage 1.

- Overall, patients receiving conservative treatment experienced an average reduction of 0.9 in the degree of prolapse.

2. **Impact of Kegel exercises, pessaries, and physiotherapy:**

- Kegel exercises: Strengthening of the pelvic muscles and support for pelvic organs. Among patients regularly performing Kegel exercises, 75% showed significant reduction in prolapse degree. Improvements were also observed in urinary tract and internal organ support.

- Pessaries: 80% of patients regularly using pessaries achieved successful results in preventing prolapse progression. In 60% of patients using pessaries, prolapse disappeared or was almost completely eliminated.

- Physiotherapy: Electrotherapy and myostimulation strengthened the pelvic muscles. 70% of patients reported improvement in physical condition, reduction in pain, and better sleep quality.

3. **Psychological and social evaluation (SF-36 test):**

- After conservative treatment, patients' quality of life significantly improved. According to SF-36 test results, 60% of patients showed positive changes in general health, energy levels, and psychological well-being. These patients felt more energetic and happier, and their sexual health improved.

- **Group 2: General recommendations (healthy lifestyle, weight control, physical activity)** Number of patients: 60 women with stage 1 and 2 pelvic organ prolapse.

1. **Degree of prolapse and POP-Q system:**

- No significant improvement in prolapse degree was observed in this group. At the start of the study, the prolapse degree in patients with stages 1 and 2 remained stable, and only minor changes were observed after treatment.

- In 50% of stage 1 prolapse patients, the prolapse degree did not change, and only slight improvements were noted. In 70% of stage 2 prolapse patients, the prolapse degree worsened and progressed to stage 3.

2. **Healthy lifestyle and avoidance of excess weight:**

- Patients in this group attempted to change their lifestyle based solely on general recommendations. In 30% of patients who monitored physical activity and weight reduction, slight improvements in prolapse degree were observed.

- Most patients did not maintain regular physical activity, which directly impacted changes in prolapse degree.

3. **Psychological and social evaluation (SF-36 test):**

- Only minor improvements in overall quality of life were observed in this group. According to the SF-36 test, 45% of patients showed slight health improvements. Most patients experienced low levels of mood and energy.

Statistical analysis:

- Chi-square and t-tests were used to assess differences between groups. The results showed significant improvements in prolapse degree and quality of life in the group receiving conservative treatment. No significant changes were observed in the group receiving only general recommendations.

- Statistical significance was established for the conservative treatment group with $p < 0.05$, indicating substantial improvements.

Results and Analysis:

1. **Effectiveness of Conservative Treatment:** The results of the study confirm that conservative treatment methods (Kegel exercises, pessaries, and physiotherapy) are effective and safe for preventing stage 1 and 2 pelvic organ prolapse. These methods slow down the progression of prolapse and help improve the quality of life of women.
2. **Preventive Measures:** The results highlight the importance of maintaining a healthy lifestyle, controlling weight, and engaging in regular physical activity. However, in the group that received only general recommendations, the changes in prolapse degree were minimal or absent.

Conclusions: This study investigated the effectiveness of conservative treatment methods in preventing and slowing down the progression of stage 1 and 2 pelvic organ prolapse. The findings led to the following conclusions:

1. **Effectiveness of Conservative Treatment:** Conservative treatment using Kegel exercises, pessaries, and physiotherapy slows the progression of pelvic organ prolapse and helps reduce the degree of prolapse. These methods play a crucial role in effectively eliminating prolapse and its prevention. For most patients, the degree of prolapse significantly decreased or was fully eliminated.
2. **Improvement in Quality of Life:** Patients who received conservative treatment showed significant improvements in their quality of life, both psychologically and physically. More than 60% of patients reported improvements in overall health, energy levels, and mood. There was also an improvement in physical activity and daily life.
3. **Prevention and Healthy Lifestyle:** The study confirmed the importance of maintaining a healthy lifestyle, reducing excess weight, and engaging in regular physical activity. However, in the group receiving only general recommendations, no significant changes in prolapse degree were observed. This indicates that relying solely on lifestyle recommendations is insufficient, and conservative treatment methods are necessary.
4. **Recommended Approaches:** The results suggest that conservative treatment should begin with physiotherapy, Kegel exercises, and effective use of pessaries for women with stage 1 and 2 prolapse. Preventive measures such as weight reduction, increased physical activity, and maintaining a healthy lifestyle are also essential.
5. **Future Research:** The results of this study are significant for confirming the effectiveness of conservative treatment methods. However, further in-depth and large-scale research on this topic is necessary. Long-term results of prolapse and broader clinical trials comparing different treatment methods are particularly important.

Overall, this study emphasizes the need for widespread use of conservative treatment methods for preventing and treating pelvic organ prolapse in women. To improve the well-being of patients, it is important to develop and promote these methods.

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