

Summary

Mrs. E, 60 years old housewife from Kelaniya, a diagnosed patient with type 2 diabetes mellitus, hypertension and dyslipidemia presented with a second degree uterovaginal prolapse and cystocele complicated with stress incontinence and other lower urinary tract symptoms and bowel symptoms. She underwent vaginal hysterectomy with cystocele repair without intraoperative complications and uneventful postoperative period except for drug induced mild hypersensitivity reaction and possible pre- syncopal attack.

Not performing urodynamic tests to assess stress incontinence was identified as a deficit in the management while lack of awareness on pelvic floor muscle strengthening exercises and not seeking conservative management options were highlighted as problems.