When patients have a uterine or vaginal vault prolapse such that the cervix or vaginal apex descends past the introitus or vaginal opening, there obviously has been a loss of support to this area. In healthy sexually active women, the vagina may be surgically attached to the sacrospinous ligament, sacrum or fascia support system. Although reconstructive techniques are effective, they can also be associated with occasional serious complications.

In the elderly who do not wish to be sexually active in the future, it has been found that a total colpocleisis is a simple, safe and effective surgical procedure that reliably relieves women of their symptoms without the potential hazards of vaginal suspension. The procedure is called total colpocleisis for patients who do not have a uterus, and a Lefort colpocleisis for patients who still have a uterus. It is performed through the vagina and essentially closes the vagina on the inside. Total colpocleisis procedure is often coupled with a tension free vaginal tape (TVT) sling procedure for urinary incontinence. Colpocleisis is an extremely effective operation. Patients can no longer engage in sexual intercourse due to the closing of the vagina.

**Facts**
- 90 – 95 percent cure rate
- Closes the vagina on the inside
- Inhibits a patient from future sexual intercourse
- Is performed using local anesthesia, epidural, spinal
- Has no need for general anesthesia
- Takes approximately 45 minutes to perform
- Minimal pain or complications
- Can be coupled with a TVT sling (incontinence)

**Best Surgical Candidates**
- Not sexually active
- Have no future for sexual activity
- Medically fragile
- Elderly