

lutching my stomach, I laughed at my mate's description of her dodgy blind date.

'Be careful, I'll pee myself!' I chortled

'Or I will!' Helen*, 40, roared. As mums of a certain age, 'squeeze before you sneeze!' was a mantra in my friendship group.

We'd all experienced a bit of leaking here and there.

After having my first daughter, Brodie, in 1997, pelvic floor exercises had my downstairs back to its best pretty quickly.

or laugh often let loose a dribble of urine.

'There's a simple surgery on offer,' my GP said. But I wasn't keen.

A panty liner often did the trick.

In 2013, though, I split with my husband.

In a bid to work off the stress, I took up boxing.

I'd always been active, and loved high-board diving, dancing, swimming and mountain biking.

But something about the lunging of boxing made my wee problem worse than ever.

'I've had enough,' I told my GP nurse. 'I want that surgery.

That March, docs inserted a tension-free vaginal tape (TVT). a polypropylene plastic mesh that supports the bladder like a sling, stopping leakage.

Two small cuts were made in my pubic area and another in my vagina. The mesh was threaded through and slung across.

Just five hours after the 20-minute op, I was discharged.

But as I left the hospital, I felt a weird drooping sensation in my groin. 'It'll wear off,' I thought, heading home to bed.

Despite an electric blanket on max, I spent the night shivering.

After that, my nose dripped constantly and my legs ached like I'd run a marathon.

Down below, I felt like someone

had taken a cheese grater to my bits.

Kath had a common, if

embarrassing, bladder issue.

Was an op the answer?

This awful scratching, slicing feeling gnawed away at me.

Other symptoms, like random rashes, bloating and shooting pains, came and went.

I'd gone from being active and happy with the occasional accident to being trapped at home barely able to walk my Lhasa Apso, Pepper.

After three weeks, I realised this wasn't just normal recovery. TVT gone wrong, I googled.

Dozens of pages popped up full of women suffering after the op - just like me. Some were in wheelchairs, many couldn't have sex or were suicidal with the pain.

Over 100,000 lawsuits had been filed in the US against the product's makers by women left with severe side effects, and 400 in Scotland where the mesh's use had been suspended in 2014.

I gasped.

What had I put inside me? The device was permanent but I begged my GP to have it removed, and I set up a group - Sling the Mesh-to campaign for TVT to be banned in England.

no good

A specialist surgeon, Natalia Price, explained the plastic material - the same used to make drink's bottles - knits with your tissue, so removing it is like getting chewing gum from matted hair.

Thankfully, last October, she got most of it out of me.

Straight away, my pain stopped. Luckily, my bladder issue hasn't returned but even if it had, it was nothing compared to the curse of the 'cure'.

Despite a lot of press around the danger of these plastic meshes, about 13,000 women in England still have the op every year.

I want every single one to read this and think twice.

Kath Sansom, 48, March, Cambridgeshire

• The Medicines and Healthcare Products Regulatory Agency (MHRA) said, 'We will continue to monitor their [TVTs'] safety and performance and we continue to encourage women to report any adverse incidents to us via the Yellow Card Scheme at www.yellowcard.mhra.gov.uk.'

Stress incontinence > the FACT

difficult

VHAT? It occurs when the pressure of your full bladder is greater than your urethra's ability to remain closed - often caused by weakness or damage to the pelvic floor or urethral sphincter, the muscles that keep the urethra closed. Pregnancy and vaginal birth are the leading cause but obesity, bladder surgery and some medications and neurological conditions also trigger it. Between three and six million people in the UK have some degree of urinary

incontinence. Women are affected more than men.

An inability to control the bladder during certain activities or functions such as sneezing, laughing, heavy lifting and exercise.

Doctors may first suggest lifestyle changes such as weight loss, reducing caffeine and altering fluid intake alongside pelvic floor exercises and bladder training. Surgical procedures such as TVT are also available.

Other leaky problems

URGE INCONTINENCE:

Involuntary urination caused by an overwhelming urge to pee that you can't stop no matter how far from a loo you might be.

OVERFLOW INCONTINENCE: The constant dribbling of urine in tiny amounts.

Got something to say about your health or a recent operation? Write to Health & Happiness, Real People, 33 Broadwick Street, London W1F ODQ, or email



