

## THE SHORTENING OF PRE-IMPLANTED TAPE MESH FOR TREATMENT OF PERSISTENT OR RECURRENT STRESS URINARY INCONTINENCE AFTER TVT-SECUR WITH OVER ONE YEAR FOLLOW-UP; IS IT EFFECTIVE?

### Hypothesis / aims of study

The objective of this study is to evaluate the efficacy of the procedure of shortening the pre-implanted tape in the treatment of persistent or recurrent stress urinary incontinence (SUI) after tension-free vaginal tape (TVT) SECUR procedure.

### Study design, materials and methods

Between July, 2007 and March, 2009, we reviewed 193 patients who underwent TVT-SECUR procedure. One-hundred thirty four patients were operated by TVT-SECUR with Hammock position, 59 by U shape position. Eighteen patients were done the shortening procedure of tape for treatment of persistent or recurrent SUI when surgery with the TVT-SECUR is failed. And the efficacy of this procedure was evaluated by Sandvik severity index, voiding symptom domain of international prostate symptom score (IPSS) with quality of life (QOL) and Visual Analogue Scale (VAS) of patient's satisfaction.

### Results

Mean age and body mass index was 48.7±9.4 years and 25.3±4.5. Mean abdominal leak point pressure ALPP was 78.1±25.9 cm/H2O. Median time between sling placement and shortening the pre-implanted tape is 5.1±4.3 months (range 1-14). Median follow up period after shortening of the tape was 16.3±4.8 months (range 12-27). Mean Operative time of shortening of the tape was 20.8±7.1 minutes. No intra- or immediate postoperative complication occurred.

### Interpretation of results

Of 18 patients who were underwent by shortening of tape mesh, there were 13/134 (9.7%) cases in Hammock type, and 5/59 (8.4%) in U type. The result is not statistically significant ( $p > 0.05$ ). After 1 months of shortening of tape, immediate cure rate was 16/18 (88.9%), and 2/18 (11.1%) had persistent leakage even after shortening of tape. After minimum of one year later follow-up, only 10/18 (55.5%) were cured, 2/18 (11.1%) improved and 8/18 (44.4%) failed. Overall VAS of patient's satisfaction was 5.5 point (range 0-10). Mean Voiding domain of IPSS and QOL is 2.1±3.1 and 0.9±1.5. Five patients (27.8%) had mild weak stream symptom after shortening of tape surgery.

### Concluding message

The shortening of the tape procedure is simple, safe and especially cheaper than any other procedure for treatment of persistent or recurrent SUI. But based on our results, it is not so effective in success rate of tape shortening after TVT-SECUR procedure in later follow up.

<b>Specify source of funding or grant</b>	NONE
<b>Is this a clinical trial?</b>	No
<b>What were the subjects in the study?</b>	HUMAN
<b>Was this study approved by an ethics committee?</b>	No
<b>This study did not require ethics committee approval because</b>	retrospective study by chart review
<b>Was the Declaration of Helsinki followed?</b>	Yes
<b>Was informed consent obtained from the patients?</b>	Yes