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MEASUREMENT OF THE THICKNESS OF THE URETHROVAGINAL SPACE IN WOMEN WITH MIXED URINARY INCONTINENCE; A PRELIMINARY STUDY

Hypothesis / aims of study

We have reported that women with stress-predominant mixed urinary incontinence(MUI) and without detrusor overactivity(DO) or with low pressure detrusor overactivity(LPDO) are more likely to be cured of their urge urinary incontinence after a midurethral sling(MUS) operation for treating mixed urinary incontinence. Few studies are available on the role of female anatomical variety such as female urethral length and anterior vaginal wall thickness in stress urinary incontinence or sexual activity. The aim of this study was to evaluate the usefulness of characterization of female urethral length(UL) and anterior vaginal wall thickness(AVWT) in women with MUI through transvaginal ultrasound.

Study design, materials and methods

The prospective data was collected for 27 women with MUI and who underwent a MUS operation. Patients with significant cystocele, pelvic floor prolapse or with history of previous pelvic surgery, psycho-neurologic diseases were excluded. Twenty-three women with MUI underwent transvaginal ultrasound with use of a 7.5MHz transrectal probe. The subjects were divided

			into 2 groups
Detrusor overactivity	Mann Whitney	Spearman	according to the
-	•	•	presence of
			detrusor
			overactivity(DO) by
			preoperative
			urodynamic study.
			Clinical and
			urodynamic
			parameters such
			as AVWT, Q-tip,
			the grade of SUI,
			the presence of
			ISD were
			compared between
			the two groups.
			The Mann Whitney
			U test were
			performed for
			statistical analysis,
			and the Spearman
			correlation
			coefficient for
			correlation.
			<u>Results</u>
			<u>Results</u>

Of 27 women, 13

patents had DO(48.1%), 14 did not(51.9%). The women's median age was 57.04 years and there were no significant differences in the age or symptom duration between the two groups. The AVWT (mm, mean \pm SD) was significantly shorter (0.45 \pm 0.07 vs 0.59 \pm 0.11, respectively, p= 0.001) and the Q-tip was significantly lower (36.54 \pm 10.88 vs 47.5 \pm 12.05, respectively, p= 0.022) in women with DO than in women without DO. There were no significant differences in the AVWT, the grade of SUI and urgency between the two groups. A significant negative correlation (correlation coefficient: -0.647) was found between AVWT and DO (p<0.001), and DO showed intermediate negative correlation (correlation coefficient: -0.450) with Q-tip (p=0.018).

Interpretation of results

In this preliminary study, the AVWT was significantly shorter and the Q-tip was significantly lower in women with DO than in women without DO.

Concluding message

It suggest that women with shorter AVWT and lower Q-tip are likely to have DO. A large-scale prospective study is needed.

Table 1. Comparative demographic and clinical data of mixed incontinent women according to the presence or absence of detrusor overactivity by preoperative urodynamic study.

parameter	Present (n=13)	Absent (n=14)	U test	correlation coefficient	References			
age	57.46±12.25	56.64±9.94	0.827		1. Preoperati ve Factors Predicting the Outcome of a Midurethal Sling Operation for Treating Women with Mixed			
Symptom duartion	5.5±5.71	5.23±4.30	0.736					
vaginal delivery	2.92±1.12	2.43±0.94	0.222					
Urethro-vaginal space thickness (cm)	0.45±0.07	0.59±0.11	0.001*	-0.647				
urethral length (cm)	4.03±1.08	4.13±1.03	0.574		Incontinence, Jae			
SUI grade	1.46±0.52	1.57±0.65	0.720		Jun Kim, Jae Hyun Bae, Jeong Gu			
Q tip	36.54±10.88	47.5±12.05	0.022*	-0.450	Lee, The Korean			
Voiding (Number/day)	9.38±3.07	9.57±3.67	0.981		Urology association 2008			
Urge incontinence (Number/day)	3.08±4.33	2.79±4.30	0.740		;49(12): 1112-1118			
Urgency (Number/day)	3.08±4.65	2.93±4.80	0.873					
ISD	0.54±0.52	0.71±0.47	0.354					
VLPP	63.46±23.19	82.57±24.66	0.099					
MUCP	43.08±17.44	57.29±27.85	0.114					
FUL	32.71±5.61	34.88±10.67	0.680					
PdetQmax	18.31±8.46	19.93±11.07	0.808					
Pdetmax	29.92±13.61	32.14±18.17	0.846					
Qmax	14.08±4.09	17.5±6.55	0.144					
VV	209.08±47.05	227.64±62.31	0.297					
RV	16.08±31.95	14.29±21.36	0.883					
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Is this a clinical trial? Is this study registered in a public of	clinical trials regist	Yes ry? No						
Is this a Randomised Controlled Trial (RCT)? Yes								
What were the subjects in the study? HUMAN Was this study approved by an ethics committee? No								
This study did not require ethics committee approval because it was a retrospective study Was the Declaration of Helsinki followed? Yes								
Was informed consent obtained from the patients? No								