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PELVIC ORGAN PROLAPSE: DOES STRESS URINARY INCONTINENCE A BAD INFLUENCE?

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INTRODUCTION:

The aim of this study is to evaluate the repercussion of stress urinary incontinence in the surgical results of POP treatment.

Material and Methods:

From January 2005 to July 2009, 262 women have been treated for pelvic organ prolapse.We have evaluate the age, number of children, presence of urgency, stress incontinence (SUI), prolapse degree, surgical time, stage time, ,early complication and late ones. Results have been treated with chi2 test (SPSS v15 program).

RESULTS: 55.7% showed SUI and 19.8% urgency. Both groups are statistically homogenous about age, number of children, surgical time, Hospitalization, and Follow up. 80.1% has cystocele (I: 4.6%, II: 5.4%; III: 66.3 and IV 3.8%), 41% Medium prolapse (I: 2.3%, II: 10.3%; III: 18.8 and IV 9.6%) and 53.4 rectocele (I: 6.5%, II: 14.1%; III: 29.0 and IV 3.8%)

POP	SUI (%)	NOT SUI (%)	р
EARLY COMPLICATION	11	12.1	0.779
Urinary Retention	4.1	0.9	0.105
Erosion	1.4	0.9	0.701
LATE COMPLICATION	47.3	44	0.595
Novo SUI	9.6	12.1	0.519
Maintenance SUI	4.8	5.2	0.889
Novo urgency	7.5	6	0.634
Maintenance urgency	3.4	7.8	0.121
Recurrence cystocele	4.8	5.2	0.889
Medium prolapse	0.7	0	0.372
rectocele	5.2	9.6	0.181
Urinary Retention	0	0.9	0.261
Erosion	5.5	5.2	0.913

CONCLUSION:

The presence of SUI associate with pelvic organ prolapse, does not augment the morbidity rate or the recurrence rate of prolapse.

Specify source of funding or grant	Xe don't have any specify source of funding or grant	
Is this a clinical trial?	No	
What were the subjects in the study?	HUMAN	
Was this study approved by an ethics committee?	Yes	
Specify Name of Ethics Committee	Comite Ético y de Investigación del Hospital Universitario Río	
	Hortega de Valladolid. Spain	
Was the Declaration of Helsinki followed?	Yes	
Was informed consent obtained from the patients?	No	