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STRESS URINARY INCONTINENCE: MONARC VERSUS MINIARC.

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OBJECTIVE

The aim of this study is to compare two different surgical techniques for female stress incontinence: Monarc versus Miniarc.

Material and Methods:

From January 2005 to July 2009, 463 women have been treated for pelvic floor disease (incontinence or prolapse). 323 suffered stress urinary incontinence (SUI): (90 treated with miniarc and 233 with monarc). 248 women showed also POP (53.5%).

We have evaluate the age, number of children, presence of urgency, the prolapse degree, surgical time, stage time, ,early complication and late ones. Results have been treated with chi2 test (SPSS v15 program).

Results:

Mean age: 61.14±9.3, number of children 2.76±1.5, surgical time 53.6±34.5 stage time 4.79±2.76, follow up 11.34±10.25. Prolapse and surgical time showed statistically difference. Success rate is miniarc 84% and monarc 87.5%.

%	miniarc	monarc	P
Early complications	0	12.9	0.031
Urinary retention	0	5.5	0.057
erosion	0	0.4	0.132

%	miniarc	monarc	P
Late complication	31.3	36.3	0.294
Novo SUI	0.1	0.4	0.390
Novo Urgency	3.3	8.5	0.993
Maintenance Urgency	6.6	9	0.509
Recurrent cystocele	0	3.1	0.396
Medium prolapse	2.1	0.8	0.674
rectocele	6.3	3.9	0.262
Urinary retention	2.1	0.4	0.428
erosion	4.4	1.7	0.252

Conclusion:

Success rate is similar, and complication rate does not show statistically difference. So, it could be reasonable to use miniarc, because is a quickest and easily technique.

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<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	Comite Ético y de Investigación del Hospital Universitario del Río Hortega de Valladolid. Spain
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No