

## CORRELATION OF RETROGRADE LEAK POINT PRESSURE WITH OBJECTIVE SEVERITY OF INCONTINENCE AFTER RADICAL PROSTATECTOMY

### Hypothesis / aims of study

As variable treatment options are required for different grades of post-prostatectomy stress urinary incontinence (SUI) an evaluation of patients before incontinence correction surgery is necessary. The objective of this study was to determine if the retrograde leak point pressure (RLPP) correlates with the severity of incontinence in patients after radical prostatectomy (RPE).

### Study design, materials and methods

12 patients suffering from post-prostatectomy SUI, admitted for incontinence correction surgery, were evaluated by RLPP, 24h micturition protocol, pad count, 20 minute pad-test and 24h pad-weight. The relationship between the parameters was examined with Pearson correlation.

### Results

The patients' mean age was 68 years (SD +/- 6.5, range: 54-77), the mean RLPP was 34.3 cmH<sub>2</sub>O (SD +/- 10.4 cmH<sub>2</sub>O), the mean 20 minute-pad-weight was 23.8g (SD +/- 38.0g) and the mean 24h pad-weight was 275.3g (SD +/- 333.0g). No significant correlation could be found between 24h pad-weight and 20 minute pad-test or pad count (r=0.06, p=0.91 and r=0.31, p=0.51, respectively). There was a strong and significant negative correlation between RLPP and 24h pad-weight (r=-0.87, p=0.025).

### Interpretation of results

Currently the 24h pad-weight constitutes the gold standard in evaluation of urinary incontinence. Nevertheless it is time-consuming and depends on the compliance of the patient. Neither the 20 minute pad-test nor the pad count showed a significant correlation with 24h pad-weight, therefore seem to be of questionable value in evaluation of incontinence. In contrast the RLPP demonstrates a strong and significant negative correlation with 24h pad-weight.

### Concluding message

In contrast the RLPP demonstrates a strong and significant negative correlation with 24h pad-weight, thus it could be used as a standardized and practicable parameter to objectify SUI in post-prostatectomy patients.

<b>Specify source of funding or grant</b>	none
<b>Is this a clinical trial?</b>	Yes
<b>Is this study registered in a public clinical trials registry?</b>	No
<b>Is this a Randomised Controlled Trial (RCT)?</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>	evaluated parameters were part of normal preoperative examination, retrospective data analysis
<b>Was the Declaration of Helsinki followed?</b>	Yes
<b>Was informed consent obtained from the patients?</b>	No