

255

**Authors:** Suvit Bunyavejchevin, MD., MHS.\* Apirak Santingamkun, MD.\*\*, Wirach Wisawasukmon, MD.,  
Pichai Bunyarattavej, MD.\*\*, Kobchitt Limpaphayom, MD.\*  
**Institution:** (\*)Gynecologic Endoscopy Unit, Division of Reproductive Medicine, Department of Obstetrics & Gynaecology,  
(\*\*)Urology Unit, Department of Surgery, Faculty of Medicine, Chulalongkorn University, .  
**Title:** TENSION-FREE VAGINAL TAPE FOR THE TREATMENT FOR STRESS URINARY INCONTINENCE IN WOMEN WITH PELVIC ORGAN PROLAPAPSE: THE PRELIMINARY STUDY.

**Objective:**

To evaluate the results and morbidity of TVT procedure in genuine urinary stress incontinence in women with pelvic organ prolapse.

**Materials and methods:**

Nine women, aged 35-68 years attending urogynecology clinic during March 2000 to March 2001, were recruited in the study. All had pelvic organ prolapse and with urodynamically confirmed primary genuine stress incontinence and were treated with TVT procedure. Preoperative evaluation included history, physical examination and urodynamic study. Followup at 3,6,9,12 months were scheduled after surgery.

**Results:**

Followup at 3, 6, 9, 12 months were scheduled after surgery. Posterior perineorrhaphy with or without anterior colpoperineorrhaphy or vaginal hysterectomy were performed together with TVT procedure. The mean operative time was  $33.33 \pm 8.29$  min. The mean hospitalization in the case of TVT with the vaginal operations for pelvic organ prolapse was  $3.33 \pm 2.74$  days . The catheterization day was  $2.33 \pm 2.0$  days. One case experienced urinary retention requiring catheterization for 7 days (from over-correction and required urethral dilatation). No patients had ladder perforation or severe blood loss. No healing defect or rejection of prolene mesh was found. At the followup time of 3 months( 9 cases), 6 months ( 5 cases), 9 months (3 cases), and 12 months (3 cases), we found no cases of recurrence of stress urinary incontinence.

**Conclusion:**

Our early results revealed that TVT is effective and safe in the treatment of stress urinary incontinence in the women with pelvic organ prolapse.