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Title:	THE CHANGE OF VOIDING PATTERN AND THE PREDICTING FACTORS AFFECTING
	VOIDING DIFFICULTIES AFTER MODIFIED FASCIAL SLING

Aims Of Study:

To evaluate the change of voiding pattern and predict the clinical factors affecting voiding difficulties after pubovaginal fascial sling in the patients with stress urinary incontinence.

Materials And Methods:

From December 1996 to January 2001, 126 women had undergone modified fascial sling with autologous rectus fascia and allograft fascia lata to treat stress urinary incontinence and could be followed. 126 patients were divided into 2 groups according to the amount of post-voiding residual within 2 days after urethral catheter removal: group $1(\le 60cc)$, group 2(> 60cc). 8 clinical parameters including age, menopause, preoperative cystocele and Valsalva leak point pressure of the patients in two groups were compared. We also evaluated the uroflow in the 97 of 126 patients preoperatively and at the 2 to 4 months (mean 3.2) postoperative follow-up visit.

Results:

There was no case of permanent urinary retention. Group 1 and 2 consisted of 75(60%) and 51 patients(40%), respectively. Mean duration of postoperative catheterization was 15 days (range 7 to 52) in group 2. Any clinical parameters did not show significant differences between two groups. The mean value of voided volume and maximum flow rate(Qmax) in uroflow at preoperative time was 255 ml 23.5 ml/sec, and at postoperative time was 198 ml and 18.3 ml/sec, respectively(p<0.05).

Conclusions:

From our results, we conclude that any clinical parameters does not seem to affect the prolonged postoperative catheterization and about 20% decrease of voided volume and Qmax in uroflow is expected at short term follow-up period after modified fascial sling. Longer follow-up is needed to identify whether this uroflowmetric change is transient or lasting.