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Title: CAN WE PREDICT FAILURE OF THE TVT PROCEDURE?

Aim of Study:

The aim of the study was to determine if there were any identifiable symptoms that were more likely to be associated with failure of the TVT procedure.

Methods:

A retrospective multi-centre observational study set in district general and teaching hospitals. Three centres included a tertiary referral centre, a teaching hospital service and a district general hospital. All available results for TVT procedures were included over a period of two years. Hospital case notes and where available the urodynamics were reviewed. Data was extracted on a standard format and databased for analysis. The patients were asked about symptoms pre and post operatively and subjective cure as defined as no leakage by the patient.

Results:

321 women are included in this study. They all had a TVT inserted, in addition 1 had a vaginal hysterectomy, 6 had an anterior repair and 15 had a posterior repair. The mean age was 54 years, range (24-84). The median weight was 70Kg, range (47-117). 87 women complained of urge incontinence prior to their operation. There is a relative risk of failure in those who complain of urge incontinence of 1.83 which is highly significant.

Pre-operative urge incontinence	87	237
D.I. on pre-op urodynamics	8	14
No urodynamics performed	17	57
Cure	70 (76%)	225 (95%)

Conclusion:

The symptom of urge incontinence should be taken seriously prior to inserting a T VT. Previous studies have alluded to the fact that a TVT cures symptoms other than stress incontinence alone. This does not appear to be the case here (1).

References:

1. Patient Perceptions of Symptoms following TVT. What does it cure. Gray B, Constantine G. Hooper P. Int Urogynecol J Vol 11 S1- FDP7 Oct 2000

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