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" THE EFFICACY OF DIFFERENT SLING OPERATIONS AMONG FEMALE PATIENTS WITH INTRINSIC SPHINCTER DEFICIENCY"

Hypothesis / aims of study

Non-invasive and minimally invasive methods for the treatment of female urinary incontinence are still being improved. However, the data concerning their efficacy and safety are insufficient. Placing the sling under the midurethra remains one of the most common procedure. But the choice of a particular type of the procedure in the treatment of intrinsic sphincter deficiency (ISD) is still unresolved.

The objective of the study was the assessment of the efficacy of different sling operations performed on female patients with ISD in period spanning from 2003 to 2006.

Study design, materials and methods

1550 urodynamic studies were performed in women reporting urinary leakage. ISD was discovered in 120 patients. 81 female patients with urodynamically confirmed ISD (Valsalva Leak Point Preassure </= 60 cmH2O) were included. The patients' average age was 60 (+/- 11), average VLPP was 45,3 cm H2O (+/- 15,1 cm H2O), average MUCP was 31,3 cm H2O (+/- 13,7 cm H2O), average BMI was 30,9 (+/- 17). Patients were devided into two groups according to the type of surgical treatment (retropubic sling – 26 patients, transobturator sling – 55 patients).

Results

The study demonstrated that 67.9% patients were cured, 22.2% improved and 9.9% failed. There was no difference in the clinical efficacy of both tested procedures. The complete cure rate following transobturator procedure was 69,9% and 65,4% after retropubic sling. Greater percentage of failures was observed among patients, who had undergone transobturator procedures – 11% in comparison to retropubic procedures – 7,7%. However, this difference was not statistically significant.

Interpretation of results

Both analysed types of sling procedures proved to be equally efficient in the treatment of patients with ISD. To obtain conclusive results regarding the efficacy of treatment women with ISD the number of patients in the each group should be higher.

Concluding message

Our investigation revealed that transobturator and retropubic sling procedures were similalry efficatious in the treatment of stress urinary incontinency complicated by ISD. The total cure rate of retropubic and transobturator sling operation seemed to be comparable and amounts to 70%.

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