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Goktug H N G[1], Imamoglu A[1], Sertcelik M N[1], Gucuk A[1], Yigitbasi O[1], Ozturk U[1], Ekici M[1], Zengin K[1]
1. *The Ministery of Health Yildirim Beyazit Education and Research Hospital Ankara TURKEY*

MID-TERM RESULTS OF THE READJUSTABLE SLING SYSTEM IN FEMALE PATIENTS WITH STRESS URINARY INCONTINENCE

Hypothesis / aims of study
To determine the mid-term results of the readjustable sling material in secondary patients with stress urinary ıncontinence (SUI).

Study design, materials and methods
Between 2006 and 2007, 26 SUI female patients who had undergone unsuccessful anti-incontinence surgery were included in the study. All patients were evaluated by history, symptom scores (International Consultation on Incontinence Questionnaire Short Form;ICIQ-SF), physical examination, Q type and pad test, preoperatively. Patients who have pure SUI and grade 1 to 2 cystocele were included. General anaesthesia was applied at lithotomy position in all patients. Remeex system is a readjustable sling which consist of 5cm. polypropylene sling with 2 traction sutures attached to a prosthesis (varitensor). The sling material is placed to the midurethral segment to support the urethra, and the varitensor is located subcutaneously at the hypogastric level. This device permit the regulation of the sling tension during the surgery, and afterwords if necessary. Subjective and objective evaluation was determined by using ICIQ-SF and pad test, respectively, at 1,3,6,12,18 and 24 months postoperatively.

Result
The mean patient age and follow-up were 52.5 years (38 to 78) and 18 months (12 to 24), respectively. The mean operation time and hospitilization time were 25 minutes (20 to 30) and 2 days (1 to 3), respectively. Twenty-one (80.7%) patients were cured (dry), 3 (11.5%) patients were improved (less than one pad), and 2 (7.6%) patients were wet (more than one pad). The mean preoperative and postoperative symptom scores were 15.1 and 3.4, respectively ($p<0.05$). Readjustment was required in 6 (23%) patients for recurrent SUI, at postoperative 1 months and 3 months in 3 and in another 3 patients, respectively. Urgency was not observed in patients with no complaints of incontinence and residual urine. Urge incontienence due to de novo overactivity was presented in 3 (11.5%) patients. Bladder perforation was observed in 2 (7.6%) patients, and the needles were repassed without any complications. Urethral erosion was observed in 1 patient at the postoperative 1 months, and the sling system was removed.

Interpretation of results
The readjustable sling system should be the choice of treatment, especially for patients with recurrent SUI. This minimally invasive surgery considerably improves the patient's quality of life.

Concluding message
The readjustable sling system is a safe and effective method. But, we think that this device can be kept for patients who had had previous anti-incontinence due to its cost.

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Is this a clinical trial?	**Yes**
Is this study registered in a public clinical trials registry?	**No**
What were the subjects in the study?	**HUMAN**
Was this study approved by an ethics committee?	**Yes**
Specify Name of Ethics Committee	**yildirim beyazit treaning and research hospital, diskapi, ankara, turkey**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**