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OUTCOMES OF TENSION-FREE VAGINAL TAPE PROCEDURE PERFORMED SIMULTANEOUSLY WITH VAGINAL HYSTERECTOMY FOR FEMALE STRESS URINARY INCONTINENCE

Hypothesis / aims of study

Hysterectomy, regardless of surgical technique, increases the risk of stress urinary incontinence surgery later in life. Patients having gynecologic problem as well as stress urinary incontinence (SUI) want to treat simultaneously them. However, transvaginal hysterectomy may cause some changes in normal architectures and tensions of surrounding tissues of the pelvic floor, and which may also cause some changes in continence mechanisms of the bladder and urethra. So, we investigated if there are any adverse effects of the concomitant vaginal hysterectomy on the outcomes of tension-free vaginal tape (TVT) procedures itself.

Study design, materials and methods

A total of 67patients enrolled in this study. The outcomes in 27 patients (TVT/VTH group) who underwent a TVT operation concomitantly with vaginal hysterectomy were compared with that in 40 patients (TVT group) who underwent only TVT operation in terms of cure and improvement of incontinence, satisfaction with the procedure (quality of life), and complication. Preoperative evaluation included history taking, physical examination, stress test, SEAPI (stress-related leakage, emptying ability, anatomy, protection and inhibition) scores. Outcomes were evaluated at over one year after operation.

Results

The cure and improvement rates were 77.5% and 15% in TVT group, and 88.9% and 7.4% in TVT/VTH group, respectively, without statistical difference between two groups (p>0.05). Total outcomes in TVT group were similar through the follow-up period from 3months to 2years. The rate of patient-satisfaction with the procedure were similar in two groups (92.5% for TVT group vs. 96.2% for TVT/VTH group) (p>0.05). There were no serious or long term complications related to the procedure except a case of local hematoma in the hysterectomy site which was controlled conservatively.

Interpretation of results

There were no statistically significant differences in total outcomes in terms of improvement of urinary incontinence and complication between the TVT only group and TVT/VTH combined group with at least 1-year follow up.

Concluding message

Our findings suggest that TVT operation can be done safely and effectively in association with vaginal hysterectomy without any additional adverse effects by that. In addition, this combined procedures may prevent the risk of additional operation procedures for stress urinary incontinence being about to be aggravated later in life following hysterectomy in patients performing hysterectomy.

References

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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?	No
This study did not require eithics committee approval because	I know the contents of this study, not personal or private, do not require ethics committee approval.
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	No