

PATIENT SATISFACTION AFTER ARTIFICIAL URINARY SPHINCTER PLACEMENT FOR URINARY INCONTINENCE: RETROSPECTIVE REVIEW WITH 18 YEAR FOLLOW-UP.

Hypothesis / aims of study

The artificial urinary sphincter (AUS) has proven to be a successful treatment for men with stress urinary incontinence (SUI) (1). Unfortunately many studies have either limited number of patients or, more importantly, limited follow-up evaluating patient satisfaction. The purpose of this study is to report our long term patient satisfaction in men undergoing AUS for SUI.

Study design, materials and methods

A retrospective chart review of patients undergoing AUS placement for SUI between 1990 and 2006 was performed. A questionnaire assessing urinary control as well as patient satisfaction was also mailed to all patients. Urinary control was assessed by presence and quality of urinary leakage and type of pad and number of pads used three months after AUS placement and at present. Satisfaction was assessed in a 10 point scale at both time points as well. The ease of use of the device and pain associated with the device were also assessed on a 10 point scale.

Results

A total of 110 AUS were placed in adult male patients between 1990 and 2006. Of these, 37 patients were deceased. Sixty of the 73 remaining patients responded to the mailed questionnaire. Of the 60 patients, 55 underwent AUS placement for post prostatectomy incontinence, one for post radiation incontinence, one for neurogenic urinary incontinence, and three for trauma related event. Two patients underwent tandem cuff placement and two patients had a transcorporeal cuff placement. The average follow-up was 7.1 years (2-18 years). 46 (77%) of patients reported overall satisfaction with the device. The average satisfaction scale was 7.6/10 and 6.6/10 at 3 months and at present, respectively (Figure 1). Pad or diaper use is reported in table 1. No patient reported pain with only one patient reporting difficulty in using the device. 22 patients underwent one or more revisions, 14 for product malfunction, 3 for atrophy, and 5 for erosion or infection. 55 (93%) of patients still have their AUS in place with all but one patient reporting continued use of the device. There were 2 peri-operative complications, including one bladder injury and one post-operative bleed requiring operative exploration.

Figure 1: Satisfaction score prior to and after AUS placement (P<0.05)

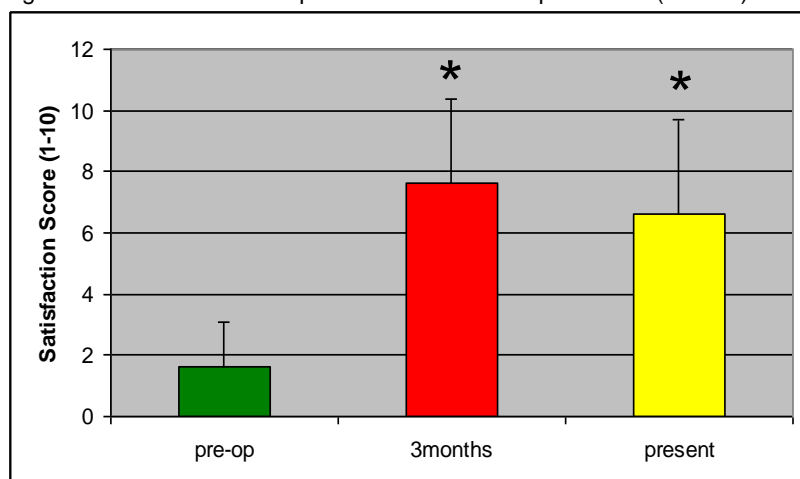


Table 1. Urinary incontinence prior to and after AUS placement.

Pre-operative	
Number of liners (n= 1)	5
Number of pads (n= 36)	4.9
Number of diapers (n= 17)	5.4
3 months post-operative	
Number of liners (n= 6)	2.2
Number of pads (n= 31)	1.5
Number of diapers (n= 1)	2
Present	
Number of liners (n= 5)	2.2
Number of pads (n= 39)	1.82
Number of diapers (n= 3)	4

Interpretation of results

The use of AUS is a safe and long term effective management for stress urinary incontinence in men.

Concluding message

The AUS is the gold standard treatment for stress urinary incontinence in male patients. We report an overall satisfaction of 77 % with follow-up up to 18 years after AUS placement.

References

1. J Urol. 2008 May;179(5):1912-6

<i>Specify source of funding or grant</i>	none
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	VMMC IRB
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes