

## LONG TERM FOLLOW UP OF QUALITY OF LIFE AFTER ANTIINCONTINENT SURGERY

### Hypothesis / aims of study

Urinary incontinence has a negative impact on the patient lifestyle and affects emotional, social, physical and sexual aspects of well-being. The aim of our study is to evaluate the long term changes of the quality of life after different antiincontinent procedures according to IQOL questionnaire and suppose the complications.

### Study design, materials and methods

This is a prospective, open label non randomized, observational longitudinal study that included 213 women with determined stress or mixed incontinence between June 1/2002 and May 30/2005 in a referral centre. The power analysis was not done. 36% of women had the symptoms of OAB preoperatively. Prior to submission, all women completed the standardised questionnaire Incontinence Quality Of Life (IQOL), medical history was taken, gynecologic examination, multichannel subtracted urodynamics and transperineal ultrasound were done. Women with mixed incontinence were treated by anticholinergic medicaments. The women underwent the antiincontinent surgery after that.

Postoperative reviews were conducted 3 months, 1, 3 and 5 years intervals after operations.

We evaluated IQOL, gynaecologic examination, transperitoneal ultrasound to detect the complications and the quality of life.

### Results

We had to exclude 33 women for the incomplete data. The preoperative details of the group of 182 women were the average of age 55 years (32-81), the average of BMI 27 (18,5-41,5), 31% of women had prior hysterectomy and 11,5% underwent prior urogynecological surgery. 99 (51%) of women underwent the TVT and 43 (23%) TVT O and 49 (26%) open colposuspension. The development of complications during the years is in table1. The complications in agreement with the type of surgery are represented equally in each group, see table 2. Postoperative de novo urgency was marked in 19% of women. The second most frequent complain was the nycturia in 14%, The preoperative OAB disappeared in 12% women after operation. 86% of women are completely dry.

Table 1 *Incidence of sampled complication after antiincontinent surgery*

Complications	3m	1y	3y	5y
Recurrent stress incontinence	7%	11%	14%	8%
OAB de novo	22 (18%)	24 (20%)	35 (29%)	23 (19%)
urinary tract infection	1%	4%	2%	2%

Table 2 *The complications in agreement with the type of surgery*

Complications/type of surgery	Colposuspension	TVT	TVT O
Recurrent stress incontinence	18%	10%	16%
OAB de novo	20%	18%	16%
Urge incontinence	6%	8%	9%
Infection of urinary bladder	0	4%	0

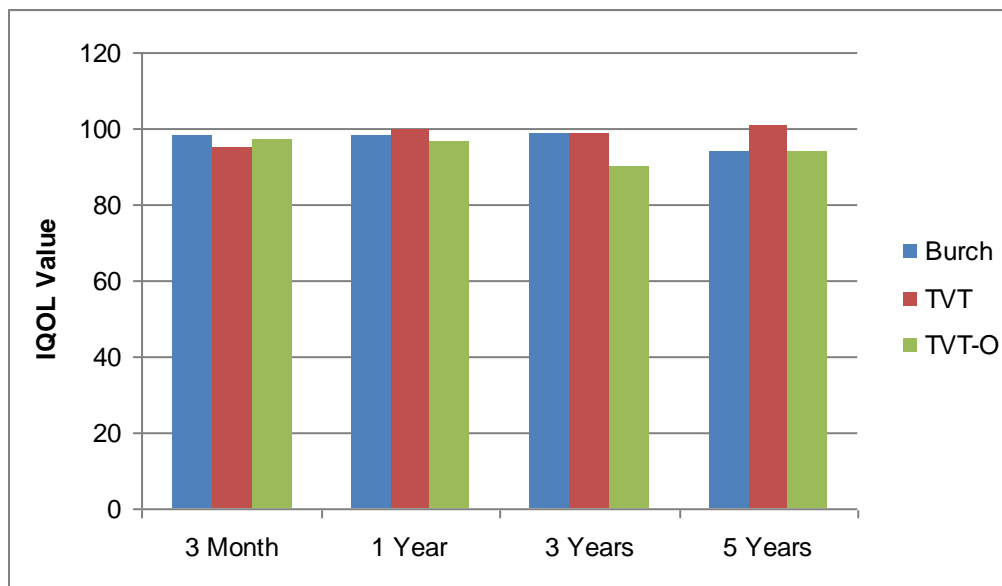
### Interpretation of results

The quality of life according to IQOL was rapidly increased after operation from 59 to 96 3m and 1 year after surgery. We marked insignificant decrease on value 92 and 90 3 and 5 years after surgery. The great improvement is continuing in 77% of women. 11% of women were moderately improved and 6% were the same or worse compared with the preoperative IQOL. The recurrences of stress incontinence and urgency have the major influence on the decrease of postoperative quality of live according to IQOL. The highest satisfaction indicates women after TVT, see column graph 1. But colposuspension reached for the high evaluation over 90 through the five years after operation.

### Concluding message

The subjective cure rate of the monitored type of surgery is high over the years. There is no difference among the TVT, TVT O and coposuspension group. The quality of life after antiincontinent surgery can be negatively influenced by the recurrence of stress incontinence and de novo OAB symptoms.

Graph 1 *The evaluation of IQOL and type of surgery*



<b>Specify source of funding or grant</b>	GIGH-0651-00-3-223
<b>Is this a clinical trial?</b>	Yes
<b>Is this study registered in a public clinical trials registry?</b>	Yes
<b>Specify Name of Public Registry, Registration Number</b>	Internal grant agency of the Ministry of Health of Czech republic, Grant.No. 8815-3/2006, GIGH-0651-00-3-223
<b>What were the subjects in the study?</b>	HUMAN
<b>Was this study approved by an ethics committee?</b>	Yes
<b>Specify Name of Ethics Committee</b>	local ethics committee
<b>Was the Declaration of Helsinki followed?</b>	Yes
<b>Was informed consent obtained from the patients?</b>	Yes