564

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THREE-YEAR OUTCOME AFTER TRANS-SECTION OF SYNTHETIC SUBURETHRAL SLING TAPE FOR TREATING OBSTRUCTIVE VOIDING SYMPTOMS FOLLOWING ANTI-INCONTINENCE SURGERY

Hypothesis / aims of study

Purpose of this study is to evaluate outcomes of suburethral sling trans-section in treating obstructive voiding symptoms following transobturator sling surgery and to evaluate recurrence rate of stress urinary incontinence (SUI) and degree of voiding dysfunction after 3 year follow up.

Study design, materials and methods

Between January, 2004 and March, 2006, we reviewed 319 patients who underwent transobturator sling surgery. Twenty-nine patients underwent trans-section of suburethral sling tape under local anesthesia. Trans-section of synthetic suburethral sling tape consisted of opening of the incision along the anterior vaginal wall, identifying the sling and isolating the sling by placing a right-angle clamp between the sling and posterior urethra and the sling was then cut in the midline. Of 29 patients, 25 patients who were possible to follow up were analyzed success rate, assessment of goal achievement with 5cm visual analogue scale, obstructive domain of international prostate symptom score and quality of life. Results

The mean age was 46.3 \pm 8.7, and mean body mass index was 23.0 \pm 2.8. Median time between sling placement and trans-section of sling tape is 75.9 days (range 1-318). Median follow up period after trans-section of sling tape was 37.3 months (range 36-50). Of 25 patients, eight patients (32%) were recurred in SUI after trans-section of sling tape and 17 patients (68%) had no incontinence. Assessment of goal achievement with 5cm visual analogue scale was 3.3 \pm 1.4. Mean obstructive domain of international prostate symptom score was 4.5 \pm 5.2. Mean quality of life is 2.3 \pm 1.6 (0-5). Four patients (20%) were suffered mild obstructive voiding symptoms, and 2 patients (4%) had severe obstructive voiding symptoms in spite of trans-section of tape mesh. Interpretation of results

Even after trans-section of suburethral sling tape, four percent of patients still have severe obstructive symptoms and almost 30% of patients were developed recurrence of SUI.

Concluding message

Trans-section of synthetic suburethral tape may be used to treat obstructive voiding symptoms following transobturator sling surgery. Obstructive symptoms are likely to improved, but one third of patients will develop recurrence of SUI.

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Was this study approved by an ethics committee?	No
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Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes