

SURGICAL IMPLANTATION OF THE PERIURETHRAL CONSTRICTOR AND ITS ACTIVATION FOR THE TREATMENT OF THE MALE URINARY INCONTINENCE.

Synopsis of Video

The male urinary incontinence is a dramatic condition in post surgical patients because, beyond the immense physical discomfort, it causes social segregation to them, deep moral damage, gradual but progressive deterioration of their self esteem. Thus, clinical or surgical solutions are welcome, since they bring concrete benefit as accented reduction or total incontinence interruption.

Hypothesis / aims of study

We show here the periurethral constrictor implantation surgical technique and its posterior activation to achieve urinary continence in a patient who had become incontinent after a prostate surgery. In spite to seem simple, the surgery is rich in details that, correctly executed, guarantee the success of the implantation. The activation, 6 to 8 weeks after, guarantees to the patient the return of his urinary continence, rescuing him for the social conviviality with physical and psychological comfort that improves the self esteem.

Study design, materials and methods

The periurethral constrictor is a silicone made one piece device that consists in an inflatable silicone ring, connected to a puncture penetrable port by a silicone tube. The ring is to be implanted around the urethral bulb and the port under the skin. With the patient in lithotomic position, under rachidian anaesthesia, after the installation of a Foley catheter, a longitudinal medium incision is made in the perineum. After that the urethral bulb is dissected. The bulbospongiosus muscle is divided, isolating the urethral bulb. The dissection progresses around the bulb, having being especially careful in the ventral surface of which the urethra, eccentric into the bulb, is much closed to. Backwards of the urethral bulb a pathway is constructed, for which the ring of the constrictor will pass. The ring is implanted around the bulb, connected to the tube and the valve that is implanted under the scrotal skin. Six to eight weeks after, the port is identified, punctured and the circuit is filled with saline solution. The patient, with the bladder previously filled with saline solution, is asked to cough and the pressure into the system is increased while he is losing urine, until he doesn't loses it anymore. The patient is now continent.

Results

The patient obtains the continent status, recovering the liberty to come and go. Almost all the patients (85%) submitted to this procedure are socially continents, the majority (70% to 75%) completely dried and a little amount (10% to 15%) wetting one or two pads a day, but every they happy and satisfied. The failed procedures were due to detrusor over activity, infection and erosion related to difficult dissection.

Interpretation of results

The implant of the periurethral constrictor is a really consistent choice to treat surgically the male urinary incontinence after prostate surgery. Its simple functionality makes it available for a great number of patients.

Concluding message

To liberate patients from the inconvenient urinary incontinence, we now have a low cost, simple, easily implantable and functional device. Immediate results can be seemed in this movie. Additional results will be published soon.

<i>Specify source of funding or grant</i>	All the implanted devices had been donated to be implanted in the patients for free, for the industry that produces them. The authors had not received extra money, for part of any interested entity. The patients have origin in the Brazilian centers of public health.
<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>	Pedro Ernesto University Hospital Ethics Committee
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes