Solyanik I¹, Bauer R¹, Becker A¹, Bastian P¹, Mayer M¹, Gratzke C¹, Koriath G¹, Domanowsky E¹, Stief C¹, Gozzi C¹

1. Dept. of Urology, Klinikum Grosshadern, Ludwig-Maximilians-University Munich

OUTCOME AFTER A FAILED BULBOURETHRAL SLING PROCEDURE IN MEN WITH POSTPROSTATECTOMY INCONTINENCE AND A REPEAT BULBOURETHRAL SLING

Hypothesis / aims of study

Treatment of the stress urinary incontinence (SUI) in men after radical prostatectomy has been revolutionized by development of the bulbourethral sling procedure (BUS). However, is it unclear what options exist if this approach fails. We prospectively evaluated the outcome of the repeat bulbourethral sling procedure.

Study design, materials and methods

Follow-up of 15 from a total of 31 men, median (range) age 68 years (56-77), with persistent or recurrent SUI after initial failed BUS was evaluated before and after the repeat BUS. Symptoms and life quality were assessed using the standardized questionnaires (I-QOL and ICIQ-UI-SF scores). Urine leakage was evaluated using a 1 hour pad test. All patients were followed 3 and 6 months after the second BUS.

Results

The mean time between initial and repeat BUS was 8 ± 3.5 months. 5 of 15 patients (33%) were totally continent, 7 of 15 patients (47%) showed a significant improvement, and 3 of 15 patients (20%) had no benefit. Two patients underwent the artificial urinary sphincter after failed repeat BUS and then archived total continence. The mean I-QOL scores was significant higher (78.5 \pm 20.9 vs. 58.5 ± 17.4 , P< 0.002) and the mean ICIQ-UI-SF score was significant lower (7.2 \pm 6.1 vs. 14.7 ± 4.5 , P< 0.005) after repeat BUS than preoperatively. Urine leakage (1 hour pad test in g) was significant lower after repeat BUS than preoperatively (80.9 g \pm 164.9 g vs. 218.6 g \pm 218.8 g, P< 0.007).

Interpretation of results

The patient self-reported life quality and SUI symptoms were improved significantly after repeat BUS.

Concluding message

Repeat BUS for persistent or recurrent SUI after failed initial BUS is an effective option with acceptable cure and improvement rates.

Specify source of funding or grant	We had no funding or grant for this study. Dr. Gozzi is additionally a consultant for American Medical Systems, Inc.
Is this a clinical trial?	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	This study reffered to the observational typ of studies. There was no intervention in this study. All diagnostic and therapeutic procedures performed in this study are widely used in the clinical practice as a standard tool and they had approval before they were used in the clinical practice.
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes