THE SHORT-TERM EFFECTS OF TVT-O TO THE TYPE I,II STRESS URINARY INCONTINENCE IN ELDERLY FEMALE PATIENTS

Hypothesis / aims of study
Stress urinary incontinence in older women, the incidence rate of 45%, severely affecting their quality of life. TVT-O technique has been widely used in the elderly female stress urinary incontinence who are type I,II in McGuire classification through ALPP. The aim of study is to evaluate the short-term effects of TVT-O to the type I,II types stress urinary incontinence(SUI) in Elderly female patients.

Study design, materials and methods
McGuire classification through ALPP: ALPP > 9.81 kPa as I type, ALPP 6.38~9.81kPa as II type,ALPP < 6.38 kPa as III type;Select 80 cases of elderly female patients with I, II-type stress urinary incontinence(ALPP >6.38kPa),who had TVT-O surgical treatment 0.5-3 years before investigation, and age over 60 years before TVT-O. Compare presurgical daily life quality and lower urinary tract symptoms with that after surgery in patients by IIQ-7 and UDI-6 through telephone survey.

Results
73 patients were followed up successfully, aged 60 to 72 years old, mean 64 ± 4.5 years. Preoperatively patients’ daily life quality as making household chores, activities, entertainment, meals, social and emotional has obviously been affected as the scores from 9 to 25 by their own scoring,mean 17 ± 6.7, and Lower urinary tract symptoms of urgency, frequent urination, movement, leakage of urine volume, voiding difficulty and dysuria scores are from 8 to 21,mean 14 ± 4.7. Mild urinary frequency are 8.2% (6/73). Urinal pad usage are 71 (97.3%) .After TVT-O ,patients felt improved by their own scoring. The daily life quality scores are ranging from 2 to 13,mean 6.4 ± 3.2, and lower urinary tract symptoms from 1 to 9,mean 5.4 ± 3.2. Mild urinary frequency after surgery was 1.4% (1/73). 39 cases completely dry(53.4%); urinal pad usage are 34 (46.6%). 11 cases occasionally had voiding suprapubic area pain or discomfort postoperatively.

Interpretation of results
Campare postsurgical self-scoring by patients with that before surgery, the daily life quality scores decrease from 17 ± 6.7 to 6.4±3.2;the lower urinary tract symptoms decrease from 14 ±4.7 to 5.4 ±3.2. Mild urinary frequency after surgery was 1.4% (1/73), significantly lower than preoperative incidence 8.2% (6/73). 39 cases completely dry(53.4%); urinal pad usage and the frequency of urinary incontinence significantly reduced from 71 (97.3%) to 34 (46.6%) after surgery.

Concluding message
TVT-O is an ideal choice for I,II-type SUI in elderly female patients by their own scoring both in daily life quality and low urinary symptoms.

References