

TRANSOBTURATOR SLINGS WITH OUTSIDE IN TECHNIQUE FOR URINARY STRESS INCONTINENCE – 3 YEARS REVIEW IN PENANG HOSPITAL, MALAYSIA

Hypothesis / aims of study

This is a prospective review of transobturator suburethral slings with the outside in technique for treatment of urinary stress incontinence (USI). We would like to show that this technique is safe and effective with minimal complications. Two types of slings were used that is the Monarc Subfascial Hammock™ from AMS and Desara™ Sling system from Caldera Medical. Both used similar technique of insertion.

Study design, materials and methods

All patients underwent preoperative assessment and had a detailed history taken and clinical examination done. They underwent preoperative urodynamic assessment to exclude other concomitant bladder disorders. Intraoperative complications and blood loss were documented. All patients had routine intraoperative cystoscopy performed to rule out bladder or urethral injury. Postoperatively patients were reviewed at two weeks, six weeks, three months and then six monthly after surgery. Patients had urodynamic assessment postoperative within three months after surgery.

Results

A total of 72 patients were included in the study. Preoperative urodynamics confirmed stress incontinence. 1 patient had overactive bladder requiring anticholinergic drugs preoperatively. 10(7.2%) patients underwent suburethral sling (SUS) only for USI alone whereas 62(92.8%) patients required SUS and other concomitant procedures of vaginal hysterectomy and pelvic floor repair. There were no intraoperative complications. The average blood loss was minimal for the suburethral sling procedure which was less than 100ml. The follow up were from 3 to 33 months. Patients were prescribed oral analgesics for one week postoperatively. All patients were discharged after passing a trial of void. Only 1 patient failed the trial of void and required sling division 4 weeks later. However she remained continent. At six weeks post surgery all patients were generally well. None of the patients complained of significant thigh pain. There were no incidences of erosions found. 4 patients had recurrent cystitis with urgency requiring antibiotics. There were 3 patients who developed denovo overactive bladder postoperatively, requiring use of anticholinergics. 6(93%) patients complained of only occasional leaks whereas the rest did not suffer from USI. 3 patients had USI only during the urodynamics study. All were generally satisfied with the surgery.

Interpretation of results

The transobturator technique using the outside in technique is very safe with no intraoperative complications. There was no significant postoperative pain found. There were no erosions noted. The incidence of urgency and cystitis were minimal and was controlled with anticholinergics. The success rate was 93% subjective cure and 88% objective cure.

Concluding message

The transobturator outside in technique for suburethral sling is safe with minimal complications

References

1. A multi-centre, randomised clinical control trial comparing the retropubic (RP) approach versus the transobturator approach (TO) for tension-free, suburethral sling treatment of urodynamic stress incontinence: the TORP study.

Specify source of funding or grant	None
Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	Hospital Pulau Pinang Ethics Committee
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes