

OUTCOMES IN PATIENTS WITH URETHRAL HYPERMOBILITY, INTRINSIC SPHINCTER DEFICIENCY OR BOTH FOLLOWING SYNTHETIC SLING INSERTION.

Hypothesis / aims of study

To objectively and subjectively examine the outcomes in women with urodynamically proven urethral hypermobility, intrinsic sphincter deficiency or both following synthetic sling insertion.

Study design, materials and methods

A retrospective audit of 37 patients was performed between May 2001 and December 2005. All patients had urodynamically proven genuine stress incontinence (GSI) with urethral hypermobility, intrinsic sphincter deficiency or both. The details of their stress incontinence were noted prior to surgery as well as their reported symptoms at first follow-up visit. Kings Health Questionnaires (KHQ) were then distributed to these patients and the results assessed. The average time from surgery to KHQ was 53 months. There was a questionnaire response rate of 63%. A patient was defined as cured if subjectively and objectively there had been complete resolution of their GSI.

Results

The cure rate of patients with urethral hypermobility (n=11) was 91% at first clinic visit and 33.3% at long-term follow-up. For patients with intrinsic sphincter deficiency (n=10) success rates were 80% then 50% and in patients with both cure rates were 100% then 30% respectively.

Interpretation of results

The audit shows poor success rates long-term apart from in the group with intrinsic sphincter deficiency. This could be due to the fact that the patients who responded are more likely to be those still with problems. Of interest though only 33.3% of patients felt that their symptoms had a large or moderate impact on their lives despite complaining of still having GSI.

Concluding message

Urodynamics still provide important information on the likely long-term outcome of patients undergoing a synthetic sling procedure. This is especially relevant as these procedures are being performed on younger women and therefore helps to ensure that they are appropriately counselled prior to undergoing a surgical procedure.

<i>Specify source of funding or grant</i>	No funding was recieved
<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>	No
<i>This study did not require ethics committee approval because</i>	There was no change from normal clinical practice.
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No