

ONE-YEAR COMPARATIVE OUTCOMES BETWEEN SUBURETHRAL SLINGS AND A THREAD-BASED SYSTEM FOR STRESS URINARY INCONTINENCE

A prospective QoL and anatomic study using transperineal ultrasound

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BACKGROUND & AIM

Midurethral slings (MUS) are established treatment for female SUI, but interest is growing in less-invasive, mesh-free strategies.

AIM

Compare 12-month clinical and anatomical outcomes of transobturator tape (TOT) versus a

METHODS

DESIGN

Prospective, non-randomized comparative study

POPULATION

50 women with Type II–III SUI

GROUPS

TOT n=25 | Thread-based n=25

PRIMARY

Objective cure: negative cough stress test at 12 months

SECONDARY

ICIQ-SF, satisfaction, TPUS anatomy

THREAD PROCEDURE

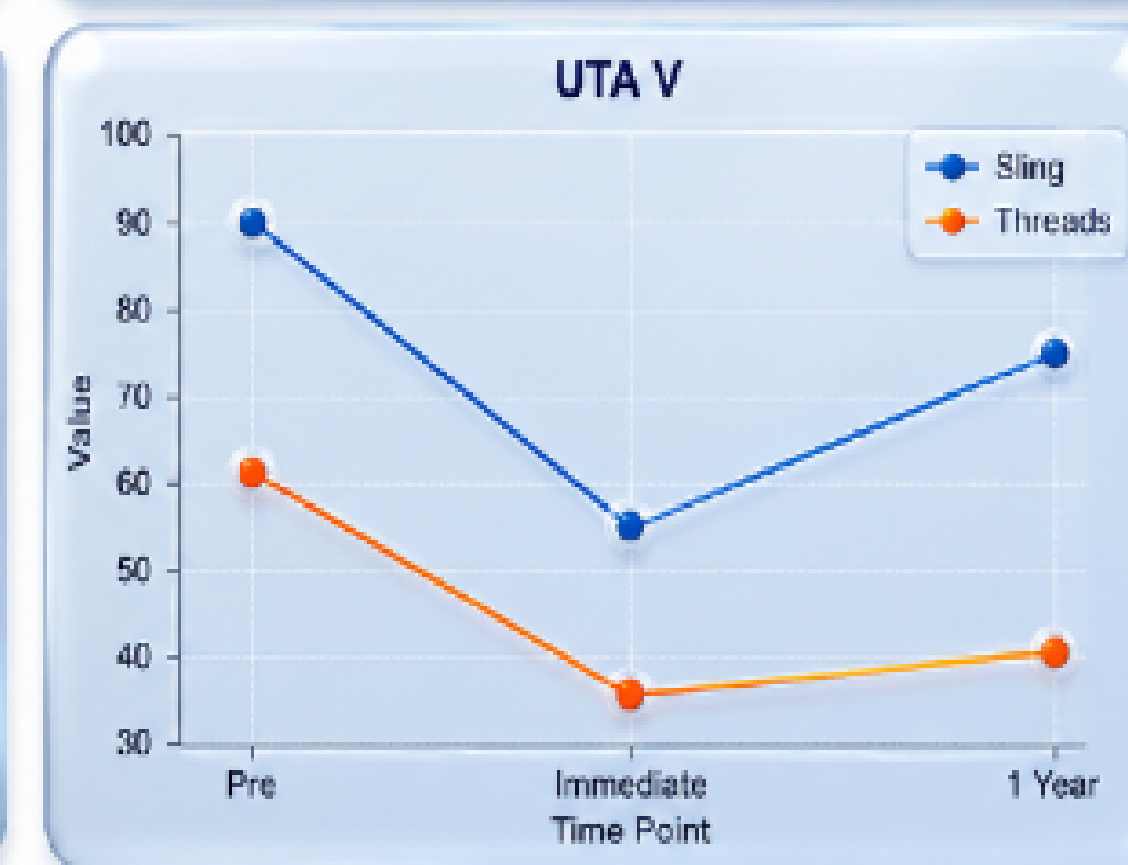
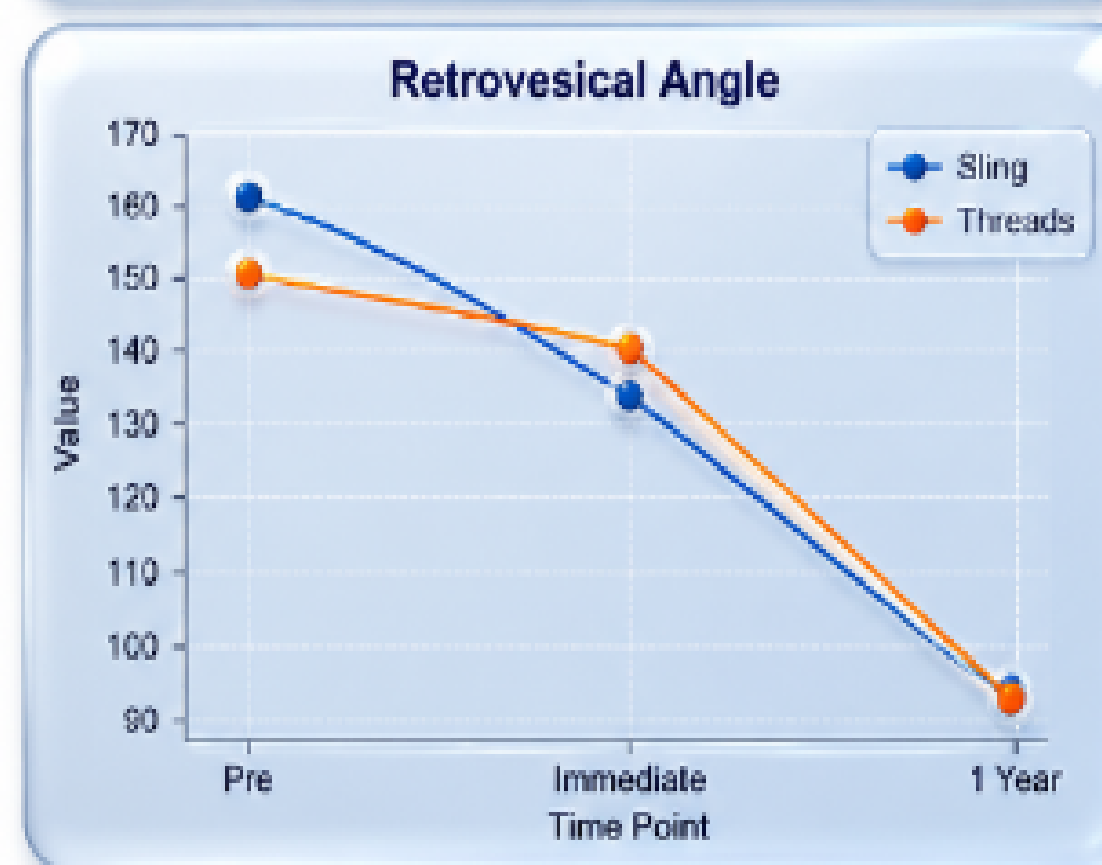
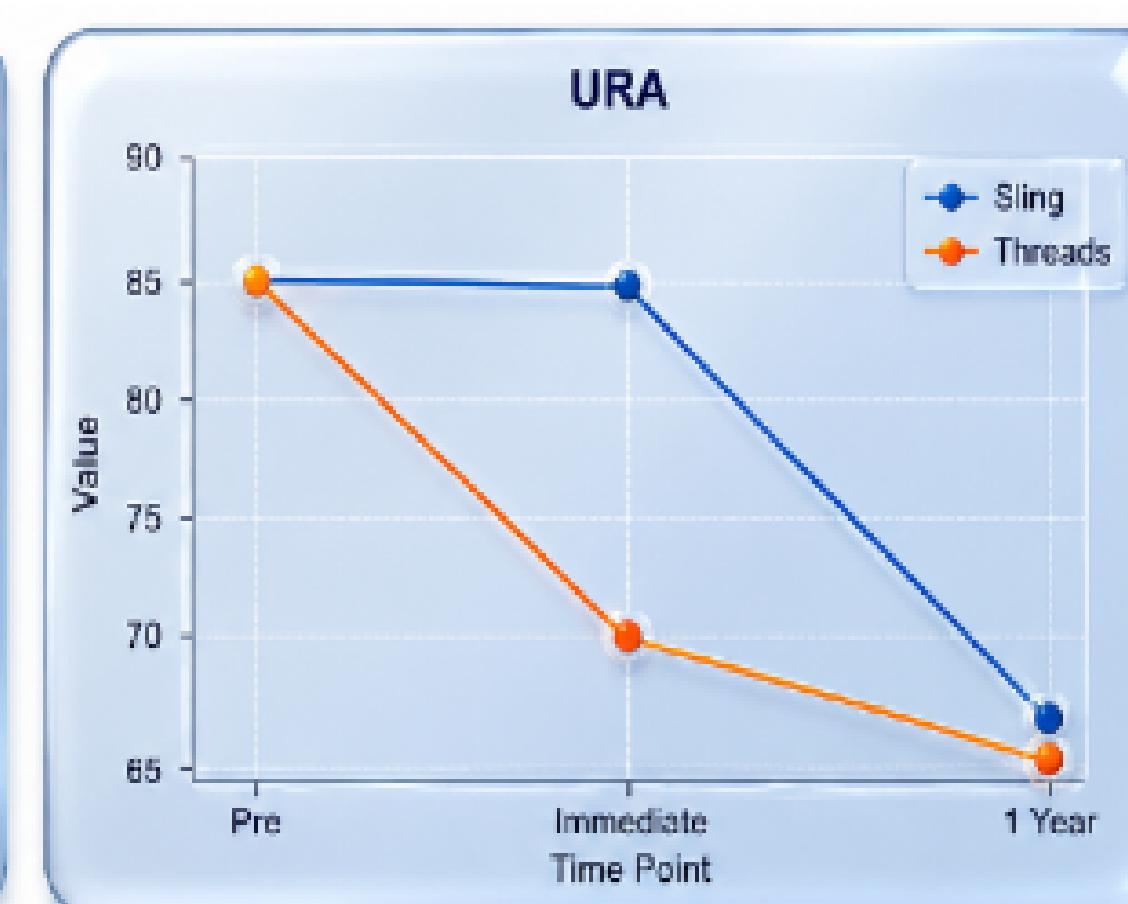
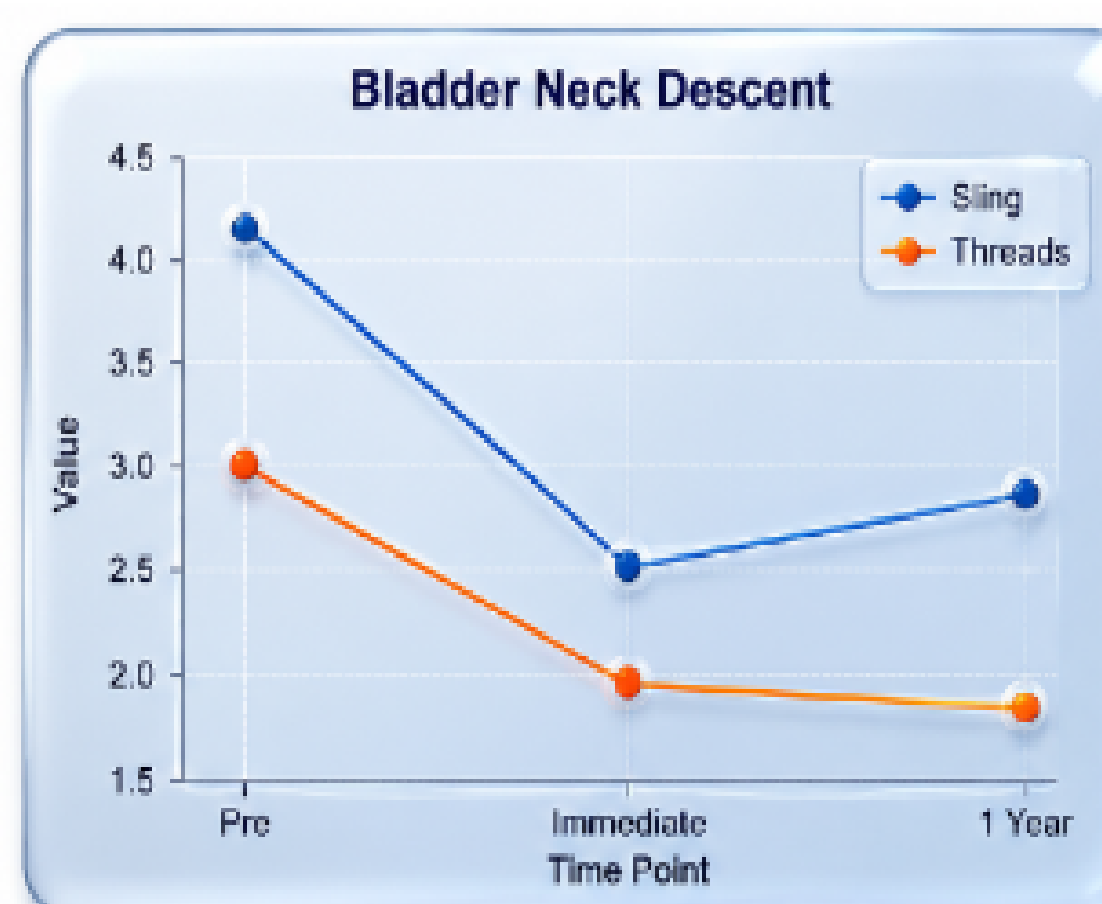
PDO threads in X + A configurations reinforcing pubourethral/urethropelvic ligaments + PRP

PRIMARY RESULT & TPUS METRICS

OBJECTIVE CURE AT 12 MONTHS

TOT / MUS 85% vs THREAD-BASED 90%

Fisher's exact test = 1.00 | 21/25 vs 22/25



- URA Urethra rotating angle > 60 hypermobility
- UTA urethra inclination angle ~ Q Tip

- RVA – UPL > 140 + IUE
- BND > 2.5 cm Hypermobility

THREAD-BASED CONCEPT

PRP → fibroblast activation / neocollagenesis



Absorbable PDO threads → temporary scaffold



Ligament reinforcement + urethral support

INTERPRETATION

At 12 months, the thread-based approach showed an efficacy signal comparable to TOT, with favorable short-term safety. These findings are hypothesis-generating, not proof of non-inferiority.

TAKE-HOME MESSAGE

Comparable 1-year cure rates suggest that biologic ligament reinforcement merits evaluation in larger randomized, multicenter trials with longer follow-up.