

# No Consensus on Antibiotic Prophylaxis in Artificial Urinary Sphincter Surgery

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## INTRODUCTION

- The AUS is the standard surgical treatment for moderate-to-severe SUI in men
- Infection and/or erosion occurs in ~8,5% within 2 years
- Early infection (< 3 months) is more likely related to perioperative factors (antibiotics, sterile technique, tissue handling)
- The EAU does not provide standardized guidelines for antibiotic prophylaxis in urological prosthesis surgery
- This study evaluates early infection rates after AUS surgery under our institutional prophylaxis protocol and explores interinstitutional variability in antibiotic choice

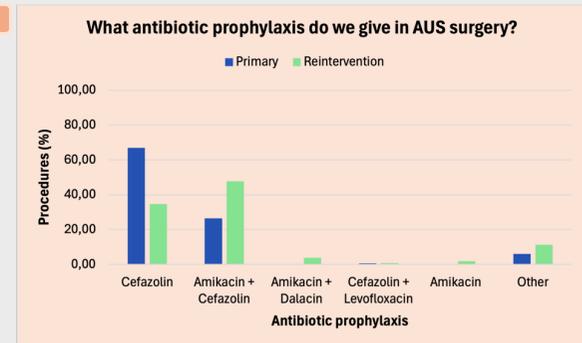
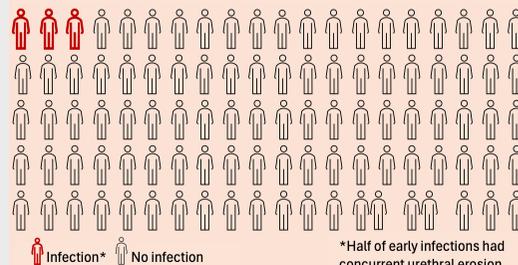
## METHODS

- Retrospective single-center study of AUS procedures performed over a 7-year period in male patients with SUI
- Contacted AUS implantation centers across Flanders to assess variability in perioperative antibiotic prophylaxis protocols

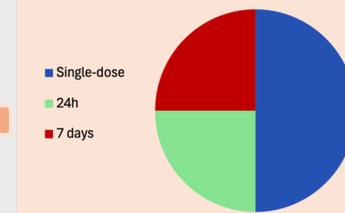
## RESULTS

- 255 AUS procedures were performed in 206 men, including 148 primary implantations and 107 reinterventions
- Early infection occurred in 8/255 procedures (3,1%), equally divided between primary and reinterventions
- All patients received antibiotic prophylaxis, most frequently cefazolin 24h alone (53,3%) or combined with a single dose of amikacin (35,3%)
- Substantial variability in perioperative antibiotic prophylaxis protocols was observed across different centers

### 3,1% early infections after AUS surgery



### No consensus on perioperative antibiotic prophylaxis in AUS surgery across 8 Flemish centers



Center	Protocol
1	● Cefazolin
2	● Cephalosporin
3	● Cefazolin
4	● Cefuroxime
5	● Cefazolin 24h (+/- Amikacin)
6	● Cefazolin 24h
7	● Amoxicillin-Clavulanate 7d + Ciprofloxacin 7d + Fluconazole
8	● Amoxicillin-Clavulanate 7d + Fluconazole



## CONCLUSION

- The substantial interinstitutional variability in antibiotic prophylaxis protocols reflects preference rather than evidence
- Our low early infection rate supports the sufficiency of our current short-course prophylaxis protocol (cefazolin 24h + single-dose amikacin)
- Standardized guidelines for infection prevention in urological prosthesis surgery are needed, incorporating antimicrobial stewardship and local microbiological data