TVT-HYBRID SLING:

A unique combination for effective treatment of stress incontinence in complex urological patients.

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HYPOTHESIS / AIMS

- **Stress Urinary Incontinence (SUI)** in female population:
 - → Tension-free Vaginal Tape (TVT)
- Risk: erosion, bladder injury, voiding dysfunction, AUR ...
- **Intermittent Self-Catheterisation (ISC)** population:
 - → Innovative approach needed: **autologous** materials
 - → Maintaining treatment efficacy: tension-free

STUDY DESIGN & METHODS

- Retrospective, monocentric study
- TVT Hvbrid:
 - Tensor fascia lata muscle tendion (central)
 - Synthetic TVT-mesh (lateral arms)
- **Treatment success:**
 - Resolution of subjective SUI complaints
 - Reduction in incontinence pads/day





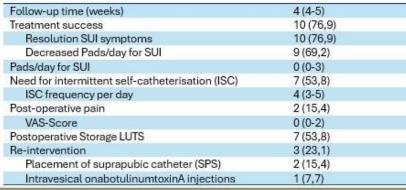


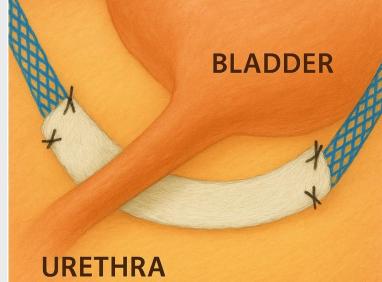
RESULTS & INTERPRETATION

- **Reduction in SUI symptoms**
- Decrease in need for ISC
- Operating time decreased from 95 minutes to 50 minutes
 - → Fast learning curve

Post-operative outcomes	N=13, n(%) or median (IQR)
Follow-up time (weeks)	4 (4-5)
Treatment success	10 (76,9)
Resolution SUI symptoms	10 (76,9)
Decreased Pads/day for SUI	9 (69,2)
Pads/day for SUI	0 (0-3)
Need for intermittent self-catheterisation (ISC)	7 (53,8)
ISC frequency per day	4 (3-5)
Post-operative pain	2 (15,4)
VAS-Score	0 (0-2)
Postoperative Storage LUTS	7 (53,8)
Re-intervention	3 (23,1)
Placement of suprapubic catheter (SPS)	2 (15,4)
Intravesical onabotulinumtoxinA injections	1 (7,7)







CONCLUDING MESSAGE

- TVT Hybrid = safe and promising for complex SUI female patients.
- Intrinsic sfincter deficiency (ISD) >< urethral hypermobility (SUI differentiation)
- Long-term effectiveness needs to be examined









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