

PROPER MESH PLACEMENT WITH LESS DISSECTION AND TENSION ADJUSTMENT COULD BE IMPROVING THE SUCCESS RATE IN PATIENTS UNDERGOING TRANSOBTURATOR ADJUSTABLE TAPE SLING PROCEDURE FOR STRESS URINARY INCONTINENCE

Introduction

The transobturator adjustable tape (TOA) sling operation is an effective procedure that allows for correction of postoperative incontinence or obstruction after operation through adjustment of mesh tension. During TOA sling operation, the outer of the ball point pen was used for proper mesh placement with less dissection. We evaluate the efficacy and safety of TOA sling operation using the outer of the ball point pen.

Design

Consecutive 127 women with stress urinary incontinence underwent TOA sling operation using the outer of the ball point pen. The preoperative evaluations were history taking, physical examination including stress cough test, urodynamic study, quality of life related questionnaires (Korean-IQoL). Mesh tension was adjusted at 1 day after operation. Postoperative evaluation was done at 1 month by stress cough test, uroflowmetry, questionnaires, asking to patient about the satisfaction. And 1 year after we evaluate stress cough test, asking about the satisfaction.

Results

The overall cure rate was 95.3% at 1 month, 96.8% at 1 year follow up. Postoperative adjustment of mesh tension was done at 22 patients (17.3%). 8 patients (6.3%) needed increased tension because of remained stress urinary incontinence, 14 patients (11.0%) needed reduced tension for urinary obstruction at 1 day after operation. 5 patients had a complaint of persistent urge incontinence. Maximal flow rate was decreased significantly at 1 month follow up ($p < 0.001$). But the residual urine volume was not increased significantly ($p = 0.390$). The total score of questionnaires (IQoL) was increased significantly ($p = 0.027$).

Conclusion

Subjective and objective results were excellent compared to outcomes of the traditional transobturator sling procedure. So proper mesh placement with less dissection and tension adjustment could be improving the success rate in patients undergoing TOA sling operation using the outer of the ball point pen for stress urinary incontinence.

Disclosures

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