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THREE-YEAR CONTINENCE RATES, SATISFACTION AND ADVERSE EVENTS OF BURCH URETHROPEXY AND FASCIAL SLING SURGERY FOR URINARY INCONTINENCE

Hypothesis / aims of study

To characterize continence, satisfaction, and adverse events in women at least 3 years after a Burch urethropexy or fascial sling with longitudinal follow-up of randomized clinical trial participants at least 5 years post-operatively.

Study design, materials and methods

482 (73.6%) of 655 women participated in a randomized surgical trial comparing efficacy of the Burch and sling treatments enrolled in this long-term observational study. Urinary continence status was assessed yearly for a minimum of three years post-operatively. Continence was defined as no urinary leakage on a three-day voiding diary and no self-reported stress incontinence symptoms AND no stress incontinence surgical retreatment.

Results

Incontinent participants were more likely to enroll in the follow-up study than continent patients (85.5% vs. 52.2%), regardless of surgical group (p < 0.0001). Overall the continence rates were lower in the Burch urethropexy group than in the fascial sling group (p=0.002). The continence rates at three years were 24.1% (95% CI 18.5% to 29.7%) compared to 30.8% (24.7% to 36.9%), respectively. Satisfaction at 5 years was related to continence status and higher in women undergoing a sling (83% vs. 73%, p=0.04). The two groups had similar adverse event rates (10% Burch vs.9 % sling) and similar numbers of participants with adverse events (23 Burch vs. 22 sling).

Concluding message

Continence rates in both groups declined substantially over three years, yet most women reported satisfaction with their continence status. Satisfaction was higher in continent women and those who underwent fascial sling, despite the voiding dysfunction associated with this procedure.

Disclosures

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