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TREATMENT OF STRESS URINARY INCONTINENCE IN MEN WITH A NEW SELF-ANCHORING ADJUSTABLE TRANSOBTURATOR MALE SYSTEM

Hypothesis / aims of study

To report our experience with a new designed self-anchoring adjustable transobturator male system (ATOMS®). Male slings are now commonly used for the treatment of stress urinary incontinence (SUI) in men.

Study design, materials and methods

Multi-centre experience including 99 men with SUI. The most common indication was SUI after radical prostatectomy (92.9%). Failure of previous surgeries was present in 34.3% patients and 31.3% patients were after secondary radiation. All patients received the implant with an outside-in technique by passing the obturator foramen and anchoring the device to the inferior pubic ramus. The titanium port was placed on the left symphysis region subcutaneously. Adjustments were performed via port access. Postoperative evaluation consisted of physical examination, 24h-pad test, and -count. Further, preoperatively and at 6-months follow-up, patients completed a validated quality of life questionnaire. Two-way analysis of variance was used to analyse changes over time. Within-group effects for time was tested by post hoc Dunnett's contrasts of baseline values vs. subsequent measurements.

Results

The mean surgery time was 47 ± 13.8 (29-112) minutes. Temporary urinary retention occurred in 2 patients (2%) and transient perineal/scrotal dysesthesia or pain was reported by 68 patients (68.7%) and resolved after 3-4 weeks of non-opioid analgesics. There were 4 (4%) cases of wound infection at the site of the titanium port leading to explantation. No urethral or bladder injuries related to the device occurred. Mean number of adjustments to reach the desired result (dryness, improvement and/or patient satisfaction) was 3.8 ± 1.3 (1-6). After a mean follow-up time of 17.8 ± 1.6 (12–33) months, the overall success rate was 92% and the mean pad use decreased from 7.1 to 1.3 pads/24h (p<0.001).

Interpretation of results

Overall, 63% were considered dry and 29% were improved. Limitations of this study are the non-randomized fashion and the short follow-up.

Concluding message

Treatment of male SUI with this self-anchored adjustable system is safe and effective.

Disclosures

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