EFFECT OF EARLY FES-BIOFEEDBACK THERAPY IN POST-RADICAL PROSTATECTOMY STRESS INCONTINENCE

Hypothesis / aims of study
One of the well-known, but bothersome complications after retropubic radical prostatectomy (RRP) is the stress urinary incontinence (SUI). Majority of SUI symptoms resolve within 1 year unless there is significant sphincter damage, however, incontinence may worsen patient’s quality of life. In this study, we aimed to evaluate the efficacy of functional electrical stimulation-biofeedback therapy (FES-BFB) in less than one postoperative month.

Study design, materials and methods
We retrospectively analysed the 78 patients’ data who had taken FES-biofeedback therapy after 135 RRP patients from January 2007 to February 2012. FES-BFB was scheduled as 2 sessions per week for 4 weeks, 25 minutes per each session. FES-BFBs were recommended to the patients with any grade of SUI after 1 month of RRP. Patients’ incontinence symptoms were evaluated after 1, 3, and 6 months of FES-BFB. Symptoms were assessed by self-report QoL satisfaction, SUI in daily activities, and amount of pad wetting to protect.

Results
Mean age of the patients was 67.45 ± 9.02(30-78) years old. At postoperative 3 months, 81 out of 47 patients (60.2%) were dry after FES-BFB. 76.9% (60/78) of the patients were completely dry at 6 month follow-up. 18 patients and 8 patients were incontinent at 3 months, 6 months follow-up, respectively.10.3% (8/78) had history of pelvic radiation therapy (RT) postoperatively. 2 of RT patients newly appeared stress incontinence after RT and resolved with FES-BFB. 3 of RT patients still had significant SUI after 6 months follow up.

There were no significant FES-BFB related complications. 76.3% were satisfied with their urinary symptoms-related QoL at 3 months follow-up, and they were increased to 86.7% at 6 months follow-up.

Interpretation of results
57.8% of RRP patients were incontinent postoperatively. With early FES-BFB therapy, cure rate at 6 months follow-up was 89.7% (70/78) with satisfied QoL.

Concluding message
SUI is common in post RRP patients. Early FES-BFB therapy within 1 month of postoperative period gives beneficial outcome in patients QoL.

Disclosures
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