Hypothesis / aims of study
Urinary incontinence (UI) remains a recognized debilitating complication after radical retropubic prostatectomy (RRP) with a reported incidence ranging widely from 1% to 47%. We evaluated the incidence of UI in this RRP series performed by a single surgeon.

Study design, materials and methods
In our centre, 868 open RRP were performed by a single surgeon between 1995 and 2010. All patients were pre-operatively counselled for incontinence. Patients were given advice for pelvic floor exercises post-operatively. Mean follow up was 84 months (6-165)
Patients were further investigated who were using 2 or more incontinence pads per day, one year after surgery. Video urodynamic studies (VUDS) was performed on symptomatic patients.

Results
At 1 year follow-up, 93% (806) patients were noted to be continent and dry. It was observed that among these patients continence gradually improved over a period of 12 months. Overall, 7% (62) of the patients were incontinent and were further evaluated. The results of the VUDS on the incontinent patients are summarized in table 1, which suggests that only 3% (32) of the total cohort of 868 patients had stress UI.

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<th>stress</th>
<th>urge</th>
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<td>18 (30%)</td>
<td>32 (48%)</td>
<td>14 (22%)</td>
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Interpretation of results
All patients were treated for stress incontinence (SUI) or urge incontinence either with surgical or medical therapies.

Concluding message
Radical prostate surgery increases overall survival yet requires long term follow up and facilities to manage longstanding complications. Multi dimensional urological services present in single centre assures good quality of care and results is adequate patient satisfaction.

Disclosures
Funding: nil Clinical Trial: No Subjects: NONE