EVALUATION STUDY BETWEEN TENSION – FREE VAGINAL TAPE (TVT) AND TRANSOBTURATOR TAPE (TOT) IN TREATMENT STRESS INCONTINENCE IN FEMALE

Hypothesis / aims of study
The aim of this study was to compare the efficacy of the TOT versus the TVT in women with stress urinary incontinence (SUI) with a median follow-up of 6 months.

Study design, materials and methods
In this randomized clinical trial, eighty female patients with SUI were randomly allocated to TVT (n=40) or TOT (n=40). Preoperative and postoperative assessments included a validated Stress and Urge Incontinence Questionnaire, a 24-h pad test. The clinicopathologic parameters of the patients included age, body mass index, onset of incontinence, previous pelvic surgery, parity, delivery, type of anesthesia, operative time, hospital stay, catheter indwelling, postoperative complications and 1, 3 and 6 months follow up of ICIQ.

Results
Age was 52.02± 0.88 for TVT and 52.27 ± 7.34 years for TOT. The rate of the complications was similar two groups. Operative time (min) was 64.50± 9.04 in TVT versus 64.00 ±9.48 in TOT (P=0.86), hospital stay (day) was 2.56±0.51 in TVT Vs 2.52±0.47 in TOT (p=0.76), catheter indwelling (day) was 1.88±0.41 in TVT Vs 1.55±0.47 in TOT (p=0.001).

Interpretation of results
Before, 1 , 3 and 6 months after intervention ICIQ was not significant between two group, although there was a non significant decrease of ICIQ in 3 and 6 months in TVT group Vs TOT group( p0.801 in 3 and 0.899 in 6 month).

Concluding message
Our results evidence a similar efficacy and safety of TVT versus TOT procedure for female SUI, although catheter indwelling was significantly longer in TVT and in 6 months follow up, TVT procedure is non significantly more effective than TOT.

References

Disclosures
Funding: Our results evidence a similar efficacy and safety of TVT versus TOT procedure for female SUI, although catheter indwelling was significantly longer in TVT and in 6 months follow up, TVT procedure is non significantly more effective than TOT. Clinical Trial: Yes Public Registry: No RCT: Yes Subjects: HUMAN Ethics Committee: Mashhad university of Medical Sciences Helsinki: Yes Informed Consent: Yes