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THE USE OF AUTOLOGOUS RECTUS FASCIA AND POLYPROPYLENE MESH AS A COMBINED SLING FOR TREATMENT OF FEMALE STRESS URINARY INCONTINENCE

Hypothesis / aims of study

The use of synthetic materials as mid-urethral slings for treatment of stress urinary incontinence is associated with a non negligible risk of urethral and / or vaginal erosions. In this study we report the 12-month results after the use of a new transobturator tape which is composed of autologous rectus fascia that is attached to a polypropylene mesh on its either side.

Study design, materials and methods

The use of synthetic materials as mid-urethral slings for treatment of stress urinary incontinence is associated with a non negligible risk of urethral and / or vaginal erosions. In this study we report the 12-month results after the use of a new transobturator tape which is composed of autologous rectus fascia that is attached to a polypropylene mesh on its either side.

Results

Two patients were not available at the 1-year follow up. The mean age for the available cases was 43.9 ± 10.3 years (range 26 to 63, median 46). At 1 year 91.7% of patients had a negative CST and 87.5% had PWT less than 1 gm. Also, at that time the scores for the UDI-6 and IIF-7 had a statistically significant decrease ($p < 0.001$) compared to those of the baseline. No cases of vaginal or urethral erosions were reported in this follow up period. The recorded complications included: temporary urinary retention in one patient who required an extra week of Foley's catheterization, dyspareunia in one patient and de-novo urge incontinence in two cases.

Concluding message

This new technique is an effective procedure for treatment of female SUI. It has the advantage of the low cost and less side effects. The most attractive issue of this new technique that there was no incidence of erosion postoperatively by replacing the polypropylene part in direct contact with the delicate urethra and vagina by an autologous rectus fascia strips through a small Pfannenstiel incision. However, a longer follow up is needed to test the durability of this technique and a randomized controlled trial with the original tape is also needed before the final conclusion.

Disclosures

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