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MANAGEMENT OF FEMALE STRESS URINARY INCONTINENCE AFTER FAILED SLING OPERATION

Hypothesis / aims of study

To explore the management of female stress urinary incontinence(SUI) after failed surgical procedures.

Study design, materials and methods

From July 2003 to May 2011, female patients with failed surgical procedures for SUI were enrolled with the mean age of 68 ± 9.8 years. All the patients were divided into three groups according to the illness severity and way of treatment. In group A (n=6), urethral catheter was detained due to voiding difficulty after sling operation and urethral catheterization, regular urethral amplification physical exercise and α -receptor blocker administration were conducted. In group B (n=13), 3 patients with mild SUI were performed electrical stimulation to pelvic floor muscles combined with levator ani muscle exercise, and the other 10 patients with moderate to severe SUI were performed TVT sling procedures after conservative therapy for 3 months. Those in group C were 10 patients with urge urinary incontinence (UUI), and they were treated with electrical stimulation to pelvic floor muscles combined with anticholinergic medications.

Results

4 patients restored voiding after treatment for 4 to 6 weeks in group A. The other (2 patients) in group A also restored the voiding with no SUI after cutting the mesh between urethra and vagina. In group B, the symptoms in patients with mild SUI disappeared after treatment for 3 months, and those in patients with moderate to severe SUI also recovered after the second TVT slings. The symptoms of UUI disappeared in 4 patients and lessened dramatically in all the other in group C.

Interpretation of results

Management of female SUI after failed surgical procedures should be determined according to individual conditions.

Comprehensive conservative therapy should come first for some patients, and if ineffective, a second operation (sling or cutting mesh) be considered. Severe UUI is a relative contraindication for a second operation.

Concluding message

Management of female SUI after failed surgical procedures should be determined according to individual conditions.

Comprehensive conservative therapy should come first for some patients, and if ineffective, a second operation (sling or cutting mesh) be considered. Severe UUI is a relative contraindication for a second operation.

References

1. Surgical Resection for Suburethral Sling Complications After Treatment for Stress Urinary Incontinence,2009; 181 (5): 2198

Disclosures

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