

ARTIFICIAL URINARY SPHINCTER AMS 800 IMPLANTATION AFTER URETHROVESICAL ANASTOMOSIS STRICTURE REMOVAL IN PATIENTS WITH SEVERE STRESS URINARY INCONTINENCE.

Hypothesis / aims of study

To evaluate the results of artificial urinary sphincter AMS 800 implantation after urethrovesical anastomosis stricture removal in patients with severe stress urinary incontinence.

Study design, materials and methods

We evaluated 33 patients from 2008 till 2013 with severe SUI after prostate surgery. Average age was 68,2 (56-77) years old. Among them 19 (57,6%) men had UVA stricture. The main reasons of SUI were: radical retropubic prostatectomy (RPE) – 15 (78,9%) of patients; adenomectomy – 2 (10,5%); transurethral resection of prostate – 2 (10,5%). The methods of removal UVA stricture were: at first - transurethral resection of anastomosis zone, at second – open reconstruction (plastic).

Results

After TUR of UVA anastomosis, relapse of stricture was noticed in 8 (42,1%) patients. Then they underwent open reconstruction of UVA anastomosis. Three months later there was no stricture relapse. All of 33 patients underwent implantation of artificial urinary sphincter AMS 800. Complications: acute urinary retention – 2 (6%) patients, resolved by catheterization or cystostomy; urethral atrophy – 2 (6%) patients, resolved by conservative treatment; urethral erosion – 2 (6%) patients, resolved by removal of the cuff and mechanical failure in 1 case (3%). After treatment 28 of 33 patients were continent.

Interpretation of results

Open reconstruction of UVA is a good option for stricture removal. After than, artificial urinary sphincter AMS 800 implantation is possible and successful.

Concluding message

Implantation of artificial urinary sphincter AMS 800 may be effective treatment in patients with severe stress urinary incontinence after prostate surgery in cases after removal of UVA strictures.

Disclosures

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