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OUR EXPERIENCE WITH TRANSOBTURATOR TAPE SLING IN THE CORRECTION OF FEMALE STRESS URINARY INCONTINENCE – EVALUATION OF SAFETY, EFFECTIVENESS AND PATIENT SATISFACTION

Hypothesis / aims of study

There are several choices for the treatment of female stress urinary incontinence. Transobturator tape slings are one of the most popular.

We wanted to evaluate the long-term efficacy and safety of transobturator tape sling for the treatment of female stress urinary incontinence, by reviewing our experience.

Study design, materials and methods

Retrospective observational study of women with stress urinary incontinence that underwent surgical correction with transobturator tape sling, between January 2007 and September 2012.

We reviewed the clinical records, in search of intra-operative and post-operative complications.

The patient satisfaction was assessed by phone interviews, with two simple questions:

1 - In a scale of 0 to 5, 5 being totally satisfied, how happy are you with the results of the surgery?

2 - Would you recommend the same surgery for a relative or a friend with the same problem (stress urinary incontinence)?

Results

We identified 335 patients. However, it was not possible to contact 47 patients. We present the results of the 288 that were successfully interviewed.

The mean age was 68 (range 28 to 86). 70% had pure stress urinary incontinence. The remaining 30% had mixed urinary incontinence. All had a positive Boney test. 45% underwent an urodinamic evaluation.

94% were operated with loco-regional anesthesia. The median operative time was 9 minutes (range 7 – 25). 95% were discharged in less than 24 hours. 66% of patients were treated with Align® and 24% with TVT-O®.

In December 2012, with a median follow-up of 41 months, 93% of women were dry.

Complications were scarce: 3 cases of vesical perforation, 1 case of vaginal erosion, 1 case of urethral erosion, 1 case of hematoma and 1 case of urethral perforation. In one of the cases the sling had to be removed.

97% of patients would recommend slings to relatives or friends with stress urinary incontinence.

Interpretation of results

The objective cure rate was 93%. 97% would recommend the same treatment to a relative or a friend.

Concluding message

Transobturator tape correction of stress urinary incontinence with a sling is a safe - it has a low morbidity, and, in our study, it had a very high degree of satisfaction.

However, a larger patient number and longer follow-up period is required to assess the long-term results and potential complications of the method in our population.

Disclosures

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