

THE PREDICTIVE FACTORS FOR IMPROVING URGE URINARY INCONTINENCE AFTER THE TRANS-OBTURATOR TAPE PROCEDURE IN MIXED URINARY INCONTINENCE PATIENTS

Hypothesis / aims of study

In mixed urinary incontinence, usually combination treatment of the medication & surgery are used. But, some studies reported successful single surgical treatment outcome. We investigate predictive factor for improving urge urinary incontinence after the trans-obturator tape (TOT) surgery in mixed urinary incontinence.

Study design, materials and methods

January 2008 to May 2013, Of 113 patient received TOT, 70 patients who had urge incontinence symptom were analyzed. Medical history, physical examination, with diabetes mellitus and hypertension, preoperative anticholinergic usage, body mass index (BMI), parity, obstetric surgical history, menopausal status, cystocele, urodynamic study, post voiding residual urine volume, preoperative duration of symptoms and the postoperative urgency were analyzed retrospectively. Age and BMI was divided 60 years and 25kg/m² respectively.

Results

The mean age of the patients was 57.5 years, mean BMI was 25.28kg/m², the number of patient with symptom grade I (pad <2) were 11 (15.7%), grade II (2 <pad <5) were 50 (71.4%) and grade III (pad > 5) were 9 (12.9%). Mean parity was 2.67 times. The number of who had diabetes melitus were 5 (7.1%), hypertension were 30 (42.9%), cystocele were 35 (50%), the history of hysterectomy in 14 (20%), postmenopausal status were 56 (80%). The mean preoperative maximum flow rate was 28.61ml/sec. the mean postvoiding residual urine volume was 5.43ml. 46 patients were taking preoperative anticholinergics (65.7%), mean duration of preoperative symptom was 8.1 months.

Interpretation of results

Of the 70 patients received TOT surgery, 50 patients (71.4%) were improved symptom of the urge incontinence after the surgery. In univariate analysis, the cases of younger age ($p = 0.023$), lower BMI ($p = 0.035$), never used anticholinergics preoperatively ($p = 0.022$) and absence of hypertension ($p = 0.035$) had more symptom improvement, significantly. However, in multivariate analysis, age (95% CI, 0.047-0.869; $p = 0.032$) were the only statistically significant factor.

Concluding message

Elderly patients with mixed urinary incontinence would have persist symptom of urge incontinence after TOT surgery. Thus, the age should be considered when treating mixed SUI.

Disclosures

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