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ADJUSTABLE TRANSOBTURATOR SLING (ARGUS T®) FOR THE TREATMENT OF POST RADICAL PROSTATECTOMY URINARY INCONTINENCE (PRPUI). LONG TERM FOLLOW UP IN 20 PATIENTS

Hypothesis / aims of study

Slings have been used for the treatment of PRPUI in many people suffering from this condition and seeking for cheaper and simpler options than an artificial sphincter. They have showed good results in short term follow ups but many patients who became continent after a sling procedure presented recurrence of incontinence after some months. Adjustable slings were developed to permit postoperative adjustments and the recovery of continence in some cases as well as to reduce the tension in the slings in cases of postoperative urinary retention. One of the major concerns in using slings in men was bladder perforation thus a transobturatory approach was developed in order to avoid this complication . We investigated the efficacy and safety of a transobturator adjustable sling to treat post radical prostatectomy urinary incontinence.

Study design, materials and methods

The Argus T system comprises a 4.2 x 2.6 x 0.9 cm thick silicone foam pad placed beneath bulbous urethra for elevation and soft bulbar urethral compression. The pad is attached to the silicone cone columns that, after being passed with needles from obturatory foramen, are adjusted with silicone washers to regulate and keep the desired tension against the urethra. Surgical approach consists on a perineal midline incision and dissection of bulbous urethra involved by the bulbospongiousus muscle. A one centimeter incision is made bilaterally 3 centimeters bellow the insertion of the major adductor muscle. A special needle is inserted in this incision through the obturatory foramen towards the region lateral to the dissected urethra and beneath the penile crus and the ischiopubic ramus to pull the sling extremities. The column ends are fixed in the subcutaneous using an adjustable silicon washer to permit late postoperative adjustments. We evaluated the efficacy and safety of Argus T to treat post prostatectomy urinary due to sphincter deficiency in 20 patients with PRPUI.

Results

Mean age was 65 years. Preoperative and postoperative evaluation included number of pads required per day, Quality of Life Evaluation using a visual analogue scale (VAS). All patients were also submitted to preoperative urodynamic evaluation. Preoperative and postoperative data were submitted to statistical analysis to determine if the variations were significant. Follow up ranged from 29 to 41 months (mean= 32 months)There was a significant reduction in pads count from 5,2 to 1,0. In the last follow up visit 16 patients (80%) were dry or wearing one pad a day, 2 (10%) improved and 2 (10%) remained unchanged. There was also an important improvement in quality of life evaluated by VAS from 10,2 to 2 (p< 0,05).

Adjustments is order to recover continence were necessary in four patients (20%). No patient had any major complications or bleeding. Adverse events included perineal pain in two patients and erosion in one.

Interpretation of results

We concluded that Argus T® is a safe effective treatment for PRPUI in a long term follow up. The complications rate is very acceptable.

Concluding message

Argus T is a safe and effective procedure and may be the first line tool for treating PRPUI.

Disclosures

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