

THE PHORBAS SYSTEM – A NEW SINGLE INCISION ADJUSTABLE MALE SLING

Introduction

Today male sling systems (adjustable and non-adjustable) are widely used for the treatment of persistent male stress incontinence. However several issues occurred including insufficient fixation, elaborate adjustment, poor results due to lack of urethral contact, and, most disturbing persistent pain. To address these possible drawbacks a new adjustable suburethral male sling system the Phorbas system was developed summarizing the lessons we have learned in the past.

Aim of the video is to show the implantation technique and to present the first results of the new male sling system Phorbas.

Design

In a prospective pre-marketing study, 21 patients with moderate to severe SUI were treated with the Phorbas system. Preoperatively, a standardized 24-hour-pad-test, evaluation of daily pad use, uroflowmetry, residual urine and quality of life scores (IQOL and ICIQ-UI SF) were performed. Postoperatively the patients were evaluated regarding 24-hour-pad-test, daily pad use, postoperative pain using the VAS, number of adjustments, quality of life scores, PGI-score and complications using the Clavien-Dindo classification.

In addition, we show the major steps of the new implantation technique in a video.

Results

The Phorbas system allows a single incision transobturator implantation. It consists of a soft inflatable pad and a scrotal port for easy percutaneous adjustment without additional surgery. To address the common problem of postoperative pain after adjustable sling implantation, the new system is a full silicone implant forming a pseudocapsule around the sling. Therefore tension and friction on the surrounding tissue, like the small perineal nerves or the periosteum of inferior pubic ramus is avoided, as the sling can slide within its capsule.

After a mean follow-up of 5.9 months (3-18 months), patients showed a significant reduction of urine loss in the pad-test from 639g preoperatively to 30 g. Cure rate was 71.4% with 12 patients using no pads and 3 using one security pad/day. Mean number of adjustments was 1.9 (0-4). Quality of life improved significantly ($p > 0.001$). Only grade I and II complications according to the Clavien-Dindo classification occurred. No intraoperative complications and no postoperative urinary retention or residual urine occurred. No sling was explanted. Besides 2 local wound infections no postoperative complications occurred. The majority of the patients experienced only mild postoperative pain and no persistent pain occurred. At max. follow-up VAS was 2 and PGI score was 1.3.

Conclusion

The new Phorbas system offers an effective and safe treatment option for persistent male stress incontinence. The implantation technique is easy to learn and several issues of former male sling systems are addressed.

Disclosures

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