

A BRAZILIAN EXPERIENCE - 6 YEARS OF SUBJECTIVE EVALUATION AFTER SYNTHETIC SLINGS

Hypothesis / aims of study

The Mater Dei Hospital, a private quaternary hospital since 2006 established a program of clinical governance with Periodic Critical analysis of the Strategic Planning Medical Staff. This analysis is conducted in quarterly meetings with the coordinators of each medical clinic of the hospital to provide clinical and technical board indicators of sustainability processes, adherence of staff members to the internal processes of the hospital, patient satisfaction, prevention of healthcare risk control, adverse events and results of care related to clinical excellence. This care model is how the institution organizes the resources available to obtain the results of VALUE to customers in the health field. The Urogynecology team defined as an indicator of quality care cure/improvement rates after surgical correction of stress urinary incontinence slings Synthetics. The aim of this study was to evaluate the results obtained according to the established target of 80% cure/improvement.

Study design, materials and methods

All patients who underwent surgical correction of stress urinary incontinence by synthetic sling (retropubic or transobturator) in the period January 2007 to December 2012 were included in the study. All patients were operated by the same team of 5 physicians, subjected to specific medical history, physical examination, urodynamics (according to ICS standards). After this initial evaluation, was offered to all patients physiotherapy as a first line treatment. Surgical treatment is indicated when the patient is not satisfied with the results of physiotherapy. One year after surgery all patients are contacted by telephone and thereafter annually (in month that made Birthday surgery) questioned about the treatment of urinary incontinence with 4 questions:

Question 1: The frequency of incontinence scale 0-5 (0 = never, 1 = 1x/week, 2 = 2x/week, 3 = 1/day, 4 = several times a day and 5 = all the time)

Question 2: as the intensity of the loss (0 = none, 2 = little, 3 = moderate amount 4 = large quantity)

Question 3: the impact of urinary incontinence in their daily activities on a scale of 0 to 10 (0 = does not interfere and 10 = interferes much)

Question 4: on the type of loss (for stress, urgency or insensitive).

We consider cure / improvement when the sum of the items in question 1 and question 2 and question 3 were lower than 5. We report the results annually. Always been considered the last follow up done by each woman to analyze the results.

Results

104 cases were operated between Jan 2007 and Dec 2012, the follow-up ranged from 12 to 72 months, the demographic characteristics of patients undergoing treatment are described in Table 1. The compilation of data obtained during the year 2013 verified that 65 (81.3%) patients contacted at least 1 follow-up were considered cured or improved urinary incontinence according to the answers to questions (Table 2). 24 (23%) women were not contacted by telephone in any of the attempts.

Interpretation of results

One of the biggest problems found to make measurements of results in urinary incontinence surgery is the appropriate follow-up of these women with objective evaluations. According to current literature, the loss of monitoring rate becomes high because the patients do not return to service for postoperative assessment at appropriate intervals. In this study the number of follow-ups for each patient increased gradually each active search, active search in the last 15 patients had 2 follow-ups, 16 patients had 3 follow-ups, 16 patients had 4 Follow-up, 3 patients had 5 Follow-ups and 2 patients had 6 Follow ups. Due to increased follow-ups we see an increase in the rate of cure / improvement from 2010 to 2013. In 2010 the rate of cure / improvement in service was 76%

Concluding message

The success rates for treatment of urinary incontinence surgery for synthetic sling at the institution are comparable to current literature. Faced with the challenge to get the proper measure of healthcare quality indicator, the team responsible for patients in this hospital has designed a way to make an active search for patients by telephone periodically contact (in month that made Birthday surgery) obtain a subjective evaluation of satisfaction as surgery performed. Therefore we could increase the number of patients contacted by increased attempts to contact and thus maintain the feeding of the indicator. Further studies with larger numbers of patients and the establishment of a questionnaire validated for application by phone is required.

Table 1- Demographic characteristics of women undergoing the Synthetic Slings

Characteristics (N: 104)	
Age (media)	55,13 (32-84)
Parity	3,6 (0-12)
SUI recurrent	36 (35%)
UDS pure SUI	76 (74%)
Mixed	24 (23%)
Normal	3 (3%)
VLPP (200ml) >60 cmH ₂ O	49 (47%)
<60 cmH ₂ O	34 (33%)
Leak in others volumes	21 (20%)

Associated procedures	gynaecological	72 (69%)
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VLPP: Value leak point pressure

SUI: stress urinary incontinence

UDS: urodynamics

Table 2 – Results - Rates of Cure / improvement

Results relating to 2013	N	%
Cure /improvement	65	81,30
Fail	15	18,70

Disclosures

Funding: No **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Mater Dei **Helsinki:** Yes **Informed Consent:** Yes