

PERSISTANT GROIN PAIN AFTER TENSION-FREE MIDURETHRAL SLING SURGERY: MESH EXCISION AND RESULTS

Hypothesis / aims of study

To present results of mesh excision in the treatment of persistant groin pain due to midurethral sling (MUS).

Study design, materials and methods

In this study, 8 patients who had undergone transvaginal mesh excision due to persistant groin pain due to MUS, between September 2013 and June 2014, were evaluated retrospectively. Patients were evaluated with Visual Analogue Scale and Stress test for pain before and after surgery.

Results

Mean age was 57,75(51-65). All midurethral sling surgeries was performed using transobturator approach. Of these 8 patients, 7 patients had unilateral groin pain and the other patient had bilateral pain. In patient with bilateral pain, mesh excision was performed at both sides, in other patients mesh excision was performed on the side of the pain. Urethral catheter removed postoperative day 1 and patients were discharged. On the postoperative 1. month, Visual Analogue Scale was significantly improved (9[8-10] vs 1[0-2]). No complications such as infection, bleeding, bladder or urethral perforation, erosion and urinary retansion occurred. All patients were continent.

Interpretation of results

As trans-vaginal tape/mesh usage increasing, patients presenting with pelvic pain after trans-vaginal mesh or tape placement emerges to be an bothersome problem. To treat persistent groin pain due to MUS, mesh excision was performed in 8 patients, in whom symptoms releaved significantly and no negative effect on continence reported by patients.

Concluding message

Mesh excision surgery is an effective treatment for persistent groin pain due to MUS.

	First patient	Second patient	Third patient	Fourth patient	Fifth patient	Sixth patient	Seventh patient	Eighth patient
Age	60	57	58	65	51	63	55	53
Previous surgery	Trans-obturator sling	Trans-obturator sling	Trans-vaginal sling	Trans-vaginal sling	Trans-obturator sling	Trans-obturator sling	Trans-obturator sling	Trans-obturator sling
Time to presentation since mesh placement in months	50	72	33	68	42	81	53	59
Pre-operative pain score VAS	10	9	8	9	9	10	8	9
Post-operative pain score VAS	1	0	0	1	1	2	2	1

Table 1: Baseline clinic demographics before mesh removal and pain outcomes after the excision.

Disclosures

Funding: None **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics not Req'd:** It's waiting for approval.

Helsinki: Yes **Informed Consent:** Yes