Results:
Mean preop. urine loss in the pad test was 270.0 g. After a follow-up of 3 months (n= 109) 64.2% of the patients were cured and 32.1% improved. Mean urine loss decreased significantly to 36.2 g (p<.001). Mean VAS was 0.5 and mean PGI 1.5. After a follow-up of 24 months (n= 73) 67.1% of the patients were cured and 23.3% improved. Mean urine loss decreased significantly to 20.6 g (p<.001). Mean VAS was 0.3 and mean PGI 1.5. After a follow-up of 36 months (n= 36) 72.2% of the patients were cured and 16.7% improved. Mean urine loss decreased significantly to 14.2 g (p<.001). Mean VAS was 0.0 and mean PGI 1.6. Mean I-QoL and ICIQ-UI SF improved significantly (both p<.001) after 36 months.

Conclusions:
The AdVance XP shows good and stable effectiveness and low complication rates even in a long-term follow-up of up to 3 years. The adequate preoperative patient selection seems to be very important for successful results. The AdVance XP shows good and stable effectiveness in a follow-up of up to 3 years.