Long-term favourable outcomes of autologous pubovaginal short sling for the treatment of female stress urinary incontinence


Saitama Medical Center, Saitama Medical University, Kawagoe, Saitama, Japan

Aims

To assess the long-term outcomes of autologous pubovaginal short sling (APSS) for the treatment of female stress urinary incontinence (SUI).

Materials and methods

From 2001 to 2013, 98 women with SUI underwent APSS in our institution. APSS is a modified pubovaginal sling technique using a 3 cm-long section of short rectus fascia with a simple procedure involving no retropubic manipulation (the right figure).

The patients’ characteristics, operative findings, early postoperative comorbidity, and early outcomes were collected from their medical records and examined.

Of the 98 women with APSS, 83 contacted and postal questionnaires, including the International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF) and the King’s Health Questionnaire (KHQ), were sent to their residences. Long-term subjective success and durability were evaluated.

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Response rate: 47% (39/83)
Median age at the questionnaire: 73 (29-95)
Median follow-up: 90 (28-175) months (8.5 years)

Long-term Subjective Outcome

NHG, King’s health questionnaire; GH, general health; II, incontinence impact; RL, role limitations; PL, physical limitations; SL, social limitations; PR, personal relationships; E, emotions; S, sleep; n.s., not significant.

Long-term Subjective outcome and durability of APSS was favourable. Serious complications were rare and late complications were few. APSS could be an option for the treatment of female SUI, although it requires a small abdominal incision and a hospital stay.

Interpretation of results / concluding message

Long-term subjective outcome and durability of APSS was favourable. Serious complications were rare and late complications were few. APSS could be an option for the treatment of female SUI, although it requires a small abdominal incision and a hospital stay.

98 Underwent APSS

83 Received the questionnaire

39 Answered the questionnaire

EARLY OUTCOME STUDY

LONG-TERM OUTCOME STUDY

Early Objective Outcome

One-hour Pad test at 3 months

Early postoperative comorbidity

Transient urinary retention 8 (8%)
Urinary tract infection 2 (2%) Pulmonary embolism 1 (1%)

Early Objective Outcome

One-hour Pad test at 3 months

Re-operation

APSS 6
TOT 1
Collagen injection 2 (overlapping)

Late postoperative complication

TVT due to recurrent SUI at 8y 1 (3%)
Anticholinergic administration 5 (13%)
No erosion

KHQ, King's health questionnaire; GH, general health; II, incontinence impact; RL, role limitations; PL, physical limitations; SL, social limitations; PR, personal relationships; E, emotions; S, sleep; n.s., not significant.

p = 0.002*

†: No or a small amount of leakage,

p = 0.049*

p < 0.001*