

## EIGHT YEAR MEDIAN FOLLOW UP OF MID-URETHRAL SLINGS, SINGLE CENTER EXPERIENCE

### Hypothesis / aims of study

This is a retrospective study evaluating patients who underwent mid-urethral sling for correction of SUI at long term. Primary outcome is the correction of SUI while Secondary outcome is the impact of Mid Urethral sling on quality of life, using UDI-6 and IIQ-7 as well as evaluation of adverse event

### Study design, materials and methods

Data were retrospectively collected for patients who underwent MUS with minimum follow up of 5 years. All patients underwent physical examination including stress test and pad test, PVR as well as urodynamic testing; in those who had treatment failure. UDI-6 and IIQ-7 were collected Failure was defined as +ve stress test, +ve pad test, both or re-treatment of SUI.

### Results

The study included a total of 68 female patients

Mean age  $45.82 \pm 7.09$  SD

Minimum follow up was 5 years. Mean follow up was 8.59 years (range. 5-15).

All had MUS as treatment of their incontinence.

Thirty-six patients underwent PVS, while 18 patients underwent TVT and 14 underwent TOT.

Ten patients had history of surgical correction of POP, 14 other pelvic surgeries.

Concomitant surgery for POP was carried out about in 42 (38%); 20 had anterior colporrhaphy, 4 posterior, and 2 combined anterior-posterior

### Interpretation of results

Table 1: Stress test at last follow up

Stress test	Sling type			Total	
	PVS	TVT	TOT		
-VE	29	16	13	58	85.3 %
+VE	7	2	1	10	14.7 %
<b>Total</b>	36	18	14	68	100%

Table 2: Pad test at last follow up

Pad test-Last follow up	Sling type			Total	
	PVS	TVT	TOT		
Negative (< 2 gm)	25	13	10	48	70.6%
Positive (> 2 gm)	11	5	4	20	29.4%
<b>Total</b>	36	18	14	68	100%

Table 3: Symptom scores at last follow up

	PVS	TVT	TOT	P Value
	mean $\pm$ (SD)	mean $\pm$ (SD)	mean $\pm$ (SD)	
UDI-6	14.97 $\pm$ (4.98)	12.83 $\pm$ (4.47)	14.64 $\pm$ (4.49)	0.294
IIQ-7	14.33 $\pm$ (6.06)	11.16 $\pm$ (5.06)	12.42 $\pm$ (5.95)	0.157

Concluding message

Both PVS and synthetic slings are effective procedures for treatment of SUI.  
PVS, TOT and TVT procedures have comparable efficacy  
Cure is inferior when based on pad test than when assessed by stress test.  
No long term adverse events were noticed after 5 years

Disclosures

**Funding:** Institutional **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** Urology Dept. Committee **Helsinki:** Yes **Informed Consent:** Yes