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RELATIONSHIP BETWEEN THE Q-TIP TEST AND PERINEAL ULTRASOUND IN WOMEN WITH URETHRAL HYPERMOBILITY SCHEDULED FOR MIDURETHRAL SLING SURGERY

Hypothesis / aims of study

To compare the relationship between the perineal ultrasound measurements and a Q-Tip test in the assessment of urethral hypermobility.

Study design, materials and methods

One hundred and thirty-eight women scheduled for midurethral sling surgery underwent Q-tip test and perineal ultrasound. Hypermobility was defined as 30° or greater from the horizontal.

Results

Outcomes included hypermobility and hypomobility. Assessment of hypermobility was correlated between the 2 methods. Cut-off level of bladder neck hypermobility was 13.9 mm. Positive and negative predictive value, sensitivity, and specificity for perineal ultrasound measurements were calculated, respectively, with a Q-Tip test as the reference standard.

Interpretation of results

Our experience suggests that bladder neck hypermobility over 13.9 mm on perineal ultrasound is a reliable diagnostic alternative to the Q-Tip test for the assessment of urethral hypermobility and is preferred by women.

Concluding message

Bladder neck hypermobility over 13.9 mm on perineal ultrasound is a reliable diagnostic alternative to the Q-Tip test.

Disclosures

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