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A FOUR YEAR OUTCOME USING THE ELEVATE ANTERIOR™ KIT FOR GRADE 3 AND 4 CYSTOURETHROCELE REPAIR IN A TERTIARY UROGYNAECOLOGY CENTRE

Hypothesis / aims of study
The Elevate™ Anterior mesh is designed to correct the anterior vaginal wall defects by providing level one and two support via a single-incision and trans-vaginal approach.

The aim of the study is to examine the objective and subjective outcomes following severe (Grade 3 and 4) cystourethrocele repair using the Elevate™ Anterior kit by a single surgeon in terms of its safety, efficacy, quality of life and associated complications.

Study design, materials and methods
A retrospective review of 39 patients with Grade 3 and 4 cystourethrocele who consented and underwent a single-incision trans-vaginal mesh (Elevate™ Anterior Kit) from 1st October 2011 to 31st March 2012 by a single surgeon. All patients were administered antibiotics prior to surgical incision and the surgeries were carried out under spinal or general anaesthesia. Cystoscopy was performed routinely post-mesh insertion to detect bladder or ureteral injury.

Peri/post-operative complications were recorded with follow up intervals arranged at 1, 6, 12, 24, 36 and 48 months post-op. Physical examination and a standardized questionnaire directed at both urinary, pain and recurrence symptoms were conducted during the follow-up sessions. Primary outcome was to assess the cure rate which is defined as patient with cystourethrocele ≤ Grade 1. Secondary outcome was to assess mesh and related complications.

Results
39 patients were studied and the mean age was 64.2 years old. The follow-up rate at 4 years was 41.0%. Subjective and objective cure rates at 4 years were 93.8% and 100% respectively.

Interpretation of results
Two (5.1%) intra-operative complications were recorded with 1 having excessive blood loss at more than 500mls and 1 having rectal perforation. One (2.6%) patient still had pelvic pain at 1 month post-op which resolved by the end of 6 months. At 12 months, 1 (3.1%) patients complained of De Novo urge/urge incontinence (U/UI) and 2 (6.3%) complained of De Novo stress incontinence (SUI). At 4 years, 1 patient (6.3%) complained of De Novo SUI but none complained of De Novo U/UI. No recurrence or mesh erosions were reported at 1 year, 2 years, 3 years and 4 years.

Concluding message
The study showed favorable subjective and objective outcome over a 4-year period. There are definite improvements in symptoms for women with severe prolapse. The study also demonstrated low risk of intra-operative and post-operative complications. However, more prospective studies with longer follow-up time are still needed to demonstrate the safety and efficacy of the Elevate™ Anterior kit.

Disclosures
Funding: NIL **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Centralised Institutional Review Board **Helsinki:** Yes **Informed Consent:** No