824

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ARE THE PATIENT GLOBAL IMPRESSION OF CHANGE (PGIC) AND ICIQ-URINARY INCONTINENCE SCORING SYSTEMS A SENSITIVE INDICATOR OF OUTCOMES FOLLOWING MALE SLING SURGERY?

Hypothesis / aims of study

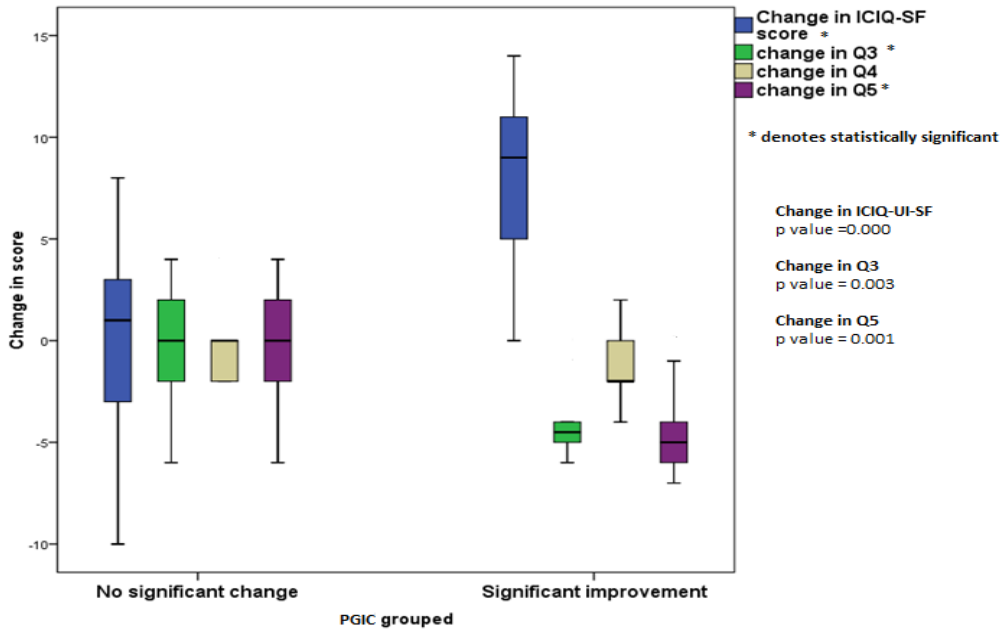
Stress Urinary Incontinence (SUI) following surgery for prostate cancer or benign prostate disease can be disabling for patients. It can have a significant impact on men's quality of life. Some studies suggest that up to 9% of patients will receive surgical treatment for post-prostatectomy incontinence (PPI). The male sling can be an effective treatment option in men with SUI avoiding a mechanical device unlike the artificial urinary sphincter.
The aim of this study was to assess levels of agreement between change in ICIQ-UI-SF scores and PGIC questionnaire scores

Study design, materials and methods

We retrospectively reviewed our prospectively acquired database of all patients who had a male (AdVance) sling inserted between January 2012 and December 2015. . Data on patient demographics, SUI aetiology, preoperative ICIQ-UI–SF questionnaires and post operative ICIQ-UI-SF and PGIC questionnaire responses were noted. Patients were grouped according to their PGIC responses with subsequent analysis: PGIC 1-4 (no change in symptoms post surgery) and PGIC 5-7 (significant change in symptoms post surgery

Results

37 patients had the sling inserted during this period with mean age 68.1 (range 57-78). The cause of SUI was following a prostatectomy for prostatic adenocarcinoma in all cases. The median length of follow-up was 33 months (range 11-70). The questionnaire response rate was 78%. 18 patients (64%) had high PGIC scores suggesting significant improvement (PGIC 5-7), which correlated with a mean reduction in ICIQ-UI-SF score of 7.9 (5.7 to 10.0 95% CI). 10 patients had low PGIC scores (PGIC 1-4) which correlated with minimal change in ICIQ-UI-SF score of 0.3 (-3.2 to 3.8 95% CI). There is statistically significant difference in ICIQ-UI-SF question 3 (frequency of leak) and question 5 (impact on QOL) between the two groups, although question 4 (volume of leak) was not a discriminator (see Graph 1).



Graph 1: Boxplots of distribution of ICIQ-UI-SF scores between the groups

Interpretation of results

There is good agreement between PGIC and ICIQ-UI-SF questionnaires and both can identify patients who have improved following surgery. The subjective perception of volume of urine leak doesn't appear to be a reliable outcome measure indicative of poor reliability of pad weight testing

Concluding message

Patient reported outcome measures are important for a robust assessment of patients post incontinence surgery. PGIC and ICIQ-UI-SF are useful in evaluating patients post male sling surgery and have good agreement.

Disclosures

Funding: N/A **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** Retrospective study of a prospective database, with no deviation from standard protocol **Helsinki not Req'd:** There was no human experimentation **Informed Consent:** Yes