861

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POST OPERATIVE VOIDING PATTERN AND THE RESULTS OF MIDURETHRAL SLING SURGERY IN DIABETIC AND NON DIABETIC FEMALE PATIENTS WITH PURE STRESS URINARY INCONTINENCE

Hypothesis / aims of study

The purpose of this study is to find out the changes in voiding pattern and results after midurethral sling surgery (MUS) in diabetic stress urinary incontinence to compare with non diabetic SUI patients

Study design, materials and methods

From January 2010 to February 2014, a retrospective survey was conducted of 209 female patients who had been diagnosed with SUI and undergone MUS. The subjects were divided into the diabetic SUI group and the nondiabetic SUI group. Changes in the overactive bladder symptom score (OABSS), American Urological Association-Symptom Index (AUA-SI), maximal uroflow rate(Qmax), residual urine volume(RU) and continence rate before and six months after the MUS were compared.

Results

Of the 189 patients, 32 patients (16.9%) were classified as diabetic SUI group, and 157 patients (83.1%) were classified as non diabetic SUI group. The mean age of the subjects was 56.7 years (range, 31-80 years), and the mean age of patients was 54.1 years (range, 34-80 years), and 55.5 years (range, 31-78 years) in the diabetic group and non diabetic group. In diabetic SUI group, voiding symptom and storage symptom among the AUA-SI were significantly increased (p=0.02, 0.03). OABSS were increased significantly. In nondiabetic SUI group, voiding symptom score of AUA-SI showed a significant increase (p=0.02), but storage symptom score and OABSS score showed an insignificant increase. The postoperative continence rate was not significant different in 92% and 95% in both group. Three patients of diabetic SUI group had postoperative urinary retention, so tape cutting was done.

Interpretation of results

Preoperative and postoperative AUA-SI, OABSS score was not different according to HbA1c in diabetic SUI patients. Post operative Qmax and RU were high in diabetic SUI group but insignificant different.

Concluding message

Prevalence of postoperative OAB was higher in diabetic SUI patients than non diabetic SUI patients. Voiding dysfunctions with deteriorated voiding symptom and storage symptom may also occur in diabetic SUI patients.

<u>Disclosures</u>

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