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Grewal M<sup>1</sup>, Beardmore-Gray A<sup>1</sup>, Pakzad M<sup>1</sup>, Hamid R<sup>1</sup>, Ockrim J<sup>1</sup>, Greenwell T<sup>1</sup>

1. University College London Hospitals NHS Trust

# QUALITY OF LIFE OUTCOMES FOLLOWING REPAIR OF VESICO-VAGINAL FISTULAE

### Hypothesis / aims of study

To identify symptomatic outcomes and sense of wellbeing following vesico-vaginal fistula (VVF) repair of various aetiologies

# Study design, materials and methods

Retrospective assessment of 36 women (median age 47.5 [25-69] years) who underwent successful fistula repair (28 vaginal and 8 abdominal). Telephone or face-to-face interviews were conducted using validated questionnaires at

median post-op follow up of 40.5 [9-138] months to assess pre-op and post-op urological symptoms and their impact on activities of daily living (ADLs) (UDI-6 and IIQ-7), bowel function (LARS), overall function and health thermometer to assess subjective sense of wellbeing (EQ5D). Women who were sexually active also completed the PISQ-12 questionnaires to assess sexual and psychosexual function.

Statistical analysis was by Chi Squared, Student T-Test and Mann-Whitney U-Test.

#### Results

	Pre-VVF Closure Median [Range]	Post-VVF Closure Median [Range]
UDI-6 Score #	16.5 [2-24]	4* [0-24]
IIQ-7 Score #	25.5 [0-28]	2.5* [0-26]
LARS Score** #	2 [0-40]	0 [0-39]
Sexually Active N (%)	0 (0)	23 (63.9)*
PISQ-12 Score *** #	N/A	14 [3-30]
EQ5D3L Score #	9 [6-13]	6 [5-10]*
EQ5D Health Thermometer Score ##	25 [0-90]	75 [10-100]*

### Interpretation of results

There was statistically significant improvement in urological and general function and the sense of wellbeing following VVF repair. Apart from the 2 women who had colostomies at the time of VVF repair, all of the women had normal bowel function and this did not change post-operatively

## Concluding message

Successful vesico-vaginal fistula repair leads to a significant improvement in urinary symptoms and the resulting impact on their daily activities, and an increase in overall wellbeing. There has not been any adverse effect on bowel function post-operatively. 63.9% of women who were operated on are sexually active afterwards.

## <u>Disclosures</u>

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