

PREDICTIVE RISK FACTORS OF OPERATION-RELATED COMPLICATIONS IN PATIENTS WHO UNDERWENT TRANSOBTURATOR TAPE SLING FOR STRESS URINARY INCONTINENCE

Hypothesis / aims of study

To evaluate risk factors of operation-related complications including mesh erosion, urinary retention and bladder injury after transobturator tape (TOT) sling procedure in patients who had stress urinary incontinence (SUI).

Study design, materials and methods

Medical records of ninety-two patients who underwent TOT sling procedure for the treatment of SUI were retrospectively reviewed. All study subjects were clinically diagnosed after urodynamic study and received TOT sling procedure. We evaluated the predictive risk factors of operation-related complications after TOT sling procedure using logistic regression model.

Results

Median age was 53 (38-75) years. A total of 10 (10.9%) patients experienced operation-related complications (4 mesh erosion, 5 urinary retention and 1 bladder injury). Seven (7.6%) patients had reoperation for management of complications. Operation-related complications more occurred in premenopausal women (18.9% vs. 5.5%, $p=0.042$) and needed longer hospital stay (≥ 2 days, 60.0% vs. 1.2%, $p<0.001$). Multivariate analysis showed that premenopausal state (Odd ratio [OR] 0.168, 95% Confidence interval [CI] 0.033-0.862; $p=0.033$) and de novo SUI (OR 25.500, 95% CI 1.136-572.368; $p=0.041$) were independent risk factors of operation-related complications after TOT sling procedure.

Interpretation of results

Premenopausal state and de novo SUI were revealed as the predictive risk factors of operation-related complications after TOT sling procedure.

Concluding message

We should be more meticulous in TOT sling procedure of the patients with these risk factors and give the information for the increased chance of operation-related complications to patients before the surgery.

Disclosures

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