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## **THE EFFECTIVENESS OF LENGTH OF URETHRAL MOVEMENT MEASURED WITH POST PROSTATECTOMY CYSTOGRAPHY ON ESTIMATE POST OP INCONTINENCE RECOVERY**

### Hypothesis / aims of study

To analyze the clinical parameters correlated with early recovery of urinary continence after radical prostatectomy, focusing especially on urethral mobility during pelvic contraction at catheter removal.

### Study design, materials and methods

At the time of catheter removal, a cystography was performed in 58 men (median age 65 years, range 55–76) who had undergone robot assisted laparoscopic prostatectomy. The vertical length of bladder neck movement between resting and contraction was measured.

The correlation between rate of incontinence recovery on post op 3 months and various clinical parameters, including age, prostate volume, International Prostate Symptom Score, quality of life score and the length of urethral movement was analyzed.

### Results

An inverse correlation was observed between length of urethral movement on day 7 and recovery rate on post op 3 months urinary incontinence (defined as [number of patients with continence/ total number of patients on post op 3 months] ( $r = -0.488$ ,  $P \leq 0.05$ ). Classifying patients into two groups according to the length of urethral movement of 5 mm gave the best accuracy for the prediction of postoperative recovery of urinary incontinence with receiver operating characteristic analysis. A statistically significant difference was observed between group 1 (length  $\geq 5$  mm) and group 2 ( $< 5$  mm) for the leakage rate until 3 months after the catheter was removed ( $P \leq 0.01$ ). Urethral movement at the time of catheter removal was significantly correlated with post-op 3 months recovery of continence in the two groups ( $P \leq 0.05$ ).

### Interpretation of results

More than 5mm of urethral movement at the time of catheter removal could predict post-op 3 months continence in patients with robot assisted laparoscopic prostatectomy

### Concluding message

Urethral mobility after robot assisted laparoscopic prostatectomy, which can be easily evaluated using cystography, may be a good predictor of post-op 3 months recovery of urinary continence.

### Disclosures

**Funding:** none **Clinical Trial:** No **Subjects:** NONE